

Methodological annexes: Rehabilitation and return to work after cancer — instruments and practices

Authors:

Inge Braspenning, Sietske Tamminga, Monique Frings-Dresen, Monique Leensen and Angela de Boer, Coronel Institute of Occupational Health, Academic Medical Centre, Amsterdam Public Health research institute, Amsterdam, the Netherlands

Christina Tikka and Jos Verbeek, Finnish Institute of Occupational Health, Finland

Fehmidah Munir and Sally Hemming, Loughborough University, United Kingdom

Ziv Amir and Liz Smith, School of Health Sciences, University of Salford, United Kingdom

Linda Sharp and Anna Haste, Institute of Health and Society, Newcastle University, United Kingdom

Project management:

Marine Cavet and Elke Schneider, European Agency for Safety and Health at Work (EU-OSHA)

This report was commissioned by EU-OSHA. Its contents, including any opinions and/or conclusions expressed, are those of the authors alone and do not necessarily reflect the views of EU-OSHA.

Europe Direct is a service to help you find answers
to your questions about the European Union

Freephone number (*):
00 800 6 7 8 9 10 11

(*) Certain mobile telephone operators do not allow access to 00 800 numbers, or these calls may be billed.

More information on the European Union is available on the Internet (<http://europa.eu>).

Luxembourg: Publications Office of the European Union, 2018

Luxembourg: Publications Office of the European Union, 2018

© European Agency for Safety and Health at Work, 2018

Reproduction is authorised provided the source is acknowledged.

Table of contents

1	Detailed descriptions of policies, systems, programmes and instruments in the field of rehabilitation and RTW after a cancer diagnosis	4
1.1	Collection of specific examples of rehabilitation programmes after cancer	4
1.2	Selection of eight good practice examples	7
1.3	Data collection of detailed descriptions	7
1.4	Comparative analysis	9
2	Company case studies	11
2.1	Collection of examples of enterprises that have implemented successful measures for managing the RTW of employees with cancer	11
2.2	Selection of eight practical examples (company case studies)	11
2.3	Data collection (company case studies)	12
2.4	Comparative analysis	12
3	Focus groups.....	13
3.1	Selection of countries	13
3.2	Selection of focus group participants.....	13
3.3	Focus group sessions.....	13
3.4	Data analysis	14
4	EU-OSHA seminar to discuss the findings.....	15
5	References	15
6	Appendix.....	16
6.1	Responses from key persons regarding the company case studies	16
6.2	Responses from national focal points regarding the company case studies	16
6.3	Responses from experts regarding the company case studies	17
6.4	Interview schedule regarding the company case studies.....	19
6.5	Online questionnaire regarding the company case studies.....	29

List of tables and figures

Table 1	Form for collecting specific examples of rehabilitation programmes after cancer	5
Table 2	Form for confirmation of already collected information on practice examples	8
Table 3	Questionnaire for description of practice examples	8
Figure 1	Sherbrooke model or ecological/case management model	15
Table 4	Description of the measures or programmes in enterprises for managing the RTW of employees with (or recovering from) cancer.....	29

1 Detailed descriptions of policies, systems, programmes and instruments in the field of rehabilitation and RTW after a cancer diagnosis

1.1 Collection of specific examples of rehabilitation programmes after cancer

To obtain a long list of practice examples of rehabilitation or RTW support policies, systems, programmes and instruments for people with a diagnosis of cancer, five different methods were used to collect information on good practice examples in Europe, Australia, Canada and the USA.

1.1.1 Literature review

A search was conducted for scientific evidence in a literature review (EU-OSHA, 2017) and interventions from systematic reviews that gave examples of rehabilitation or RTW support policies, systems and programmes were selected.

This systematic literature search was run in four electronic databases (Medline through PubMed, Embase through Scopus, PsycINFO and OSH-Update). The search strategy was made up of concepts related to cancer, RTW outcomes, and programmes and practices on RTW. From the literature review, it was found that that only multidisciplinary interventions have a positive influence on RTW. Therefore, we included only multidisciplinary interventions.

1.1.2 Online questionnaire

An online questionnaire was sent out to collect information on possible examples of rehabilitation and RTW support policies, systems and programmes. The questionnaire was sent to key persons from networks and institutes active in the field of cancer and RTW: the Cancer Control Joint Action (CanCon), the European Cooperation in Science and Technology (COST) of the Cancer and Work Network (CANWON), the Executive Agency for SMEs (EASME), the European Platform for Rehabilitation (EPR), EU-OSHA, the European Network for Workplace Health Promotion (ENWHP) and the Partnership for European Research in Occupational Safety and Health (PEROSH). The responses were used for the descriptions of policies, systems, programmes and instruments.

The questionnaire instructions are outlined below:

If you know any information on any type of intervention, instrument or practice aiming to enhance RTW in your country or elsewhere, please fill in this form.

Table 1 Form for collecting specific examples of rehabilitation programmes after cancer

Instruction	Use Table 1 to add names of service providers and sources of RTW interventions for cancer survivors. Use Table 2 to provide information on specific interventions you know of.
Definition	Relevant interventions are any type of vocational ¹ , psycho-educational ² or multidisciplinary ³ intervention, instrument or practice aiming to enhance RTW for cancer survivors during or after treatment. Not relevant are interventions that include only medical, pharmacological ⁴ and/or physical ⁵ rehabilitation services (e.g. physiotherapy, surgery or hormone therapy).
Examples	Any type of national or regional strategy, campaign, guidelines, practical guides or joint programmes of, for example, social and occupational services, or dissemination of informative materials, workplace policies, workplace adjustments, toolkits or training courses for, for example, employers or managers.

1.1.3 Grey literature

The grey literature was searched to compile a broad overview of existing programmes and interventions. The reason for including grey literature was to fill the gap created by the expected lack of scientific evidence on interventions, programmes or policies that focused on cancer survivors and RTW. Grey literature that reported only on other outcomes, such as prognostic factors, was excluded from this report.

The grey literature was searched using the following databases and sources:

- Google;
- OpenGrey;
- specific websites of government and OSH organisations, social partners and NGOs, including:
 - Agence Nationale de Sécurité Sanitaire de l'Alimentation, de l'Environnement et du Travail (ANSES, France);
 - EU-OSHA;
 - Eurostat;
 - Finnish Institute of Occupational Health (FIOH);
 - Health Council of the Netherlands;
 - International Agency for Research on Cancer (IARC);
 - International Labour Organization (ILO);
 - KU Leuven;
 - Organisation for Economic Co-operation and Development (OECD);
 - Occupational Medicine/University of Southampton.

¹ Vocational: any type of intervention focused on employment that targets the person or the workplace (e.g. modified work hours, modified work tasks or improved communication with or between managers, colleagues and health professionals).

² Psycho-educational: any type of psycho-educational intervention, such as (vocational) counselling, education or training aimed at enhancing RTW undertaken by any qualified professional (e.g. occupational physician, psychologist or social worker).

³ Multidisciplinary: any combination of vocational, psycho-educational, medical and/or physical interventions, programmes and/or practices.

⁴ Medical or pharmacological: any type of medical intervention (e.g. surgical) or medication (e.g. hormone treatment).

⁵ Physical: any type of physical training (e.g. walking), physical exercise (e.g. arm lifting) or training of bodily functions (e.g. vocal training).

1.1.4 Inventory

The aim was to take an inventory of programmes, policies and guidelines in 20 EU countries part of COST (CANWON) action.

National networks and institutes active in the field of cancer and RTW were contacted to request their participation in the survey. After the first round of emails, two participants (Greece and Finland) replied. After a reminder was sent out, only three more participants replied (the Netherlands, Romania and Slovenia). The survey sent out is outlined below.

1 General question

1.1 Is there a national cancer strategy or cancer control programme in your country?

If yes, does it mention cancer and work/employment?

2 Government or national legislation regarding RTW

2.1 Is there national legislation that supports cancer survivors' RTW?

If yes, is cancer considered a separate 'disability' for legal purposes?

2.2 Can you list the form of this legislation, e.g. disability leave, possibility for paid or unpaid leave, job or post protection, etc.

2.3 What other legislation is in place regarding work for people with disabilities, including cancer, e.g. early retirement?

2.4 Are there any economic incentives given by the government to support RTW for cancer patients? If yes, can you briefly explain?

a. For employers?

b. For employees?

c. For professionals?

2.5 Are there any national RTW initiatives for cancer survivors or other employees suffering from chronic diseases (strategic plans, pilot programmes, etc., that can be led by governmental, non-governmental, charity or other organisations)?

If yes, can you briefly explain?

3 Guidelines for employers

3.1 Are there legal obligations for employers regarding hiring or retaining cancer survivors (or other forms of chronic diseases/disabilities)?

If yes, please tell us about these.

3.2 Are there any national initiatives to support employers in hiring or retaining cancer survivors?

3.3 If you can find this information, what do you know about the view of the main employers' representatives regarding RTW?

4 Guidelines for employees or cancer survivors

4.1 What are the legal rights of workers diagnosed with cancer (pension, RTW)?

4.2 Are there any initiatives for workers' RTW?

4.3 If you can find this information, what is the view of the main workers' representatives regarding RTW?

4.4 Are there any guidelines from patient organisations (e.g. cancer leagues) on workforce participation among cancer survivors?

If yes, please tell us about these, even if they are the same as for workers with other disabilities.

If yes, what do these contain/cover? If there is a website, please provide it.

If no, is there any informal/other information on the 'view' of employer organisations/representatives on workforce participation among cancer survivors?

5 Guidelines for professionals

5.1 What are the main guidelines to support patients' RTW or to support patients who have returned to work?

5.2 If you can find this information, what is the view of the main medical professional representatives regarding RTW?

6 Other

6.1 Is there anything else relevant that you would like to tell us (e.g. guidelines under development)?

1.2 Selection of eight good practice examples

Based on the literature review, the additional findings from the grey literature, an online questionnaire to key persons and the inventory of guidelines, eight good practice examples were selected to be described in detail, in agreement with EU-OSHA.

The good practice examples of rehabilitation or RTW support policies, systems, programmes and instruments for people diagnosed with cancer were selected on the basis of the following selection criteria:

- They showed a particularly comprehensive approach, for example:
 - they targeted multiple stakeholders, including employees, employers, the self-employed, HR managers, family members, healthcare providers and/or other stakeholders, with the aim of enhancing collaboration between the parties involved;
 - they had multiple modalities, for example information provision in combination with interactive modules such as consultation, counselling, (telephone) support, e-learning or training.
- They presented typical and innovative practices, for example:
 - they were tailored to the patient's preferences, profile and needs;
 - they targeted vulnerable groups, for example the unemployed.
- They covered examples from a range of Member States, including at least Denmark, France, the Netherlands and the UK.
- They showed diversity across the Member States, such as differences in OSH systems and approaches.
- They presented different forms of cancer in a diversity-sensitive way.
- They included both genders in a gender-sensitive way.
- They were dated from 2006 onwards.
- They were part of a finished study. Ongoing trials, e.g. randomised control trials, ongoing feasibility studies or pilot studies, were excluded.

1.3 Data collection of detailed descriptions

An online questionnaire was sent to the project leaders of the practice examples that were selected. The aim of the online questionnaire was to gain detailed descriptions of the eight good practice examples. First, an email was sent to the project leaders with the questionnaire included and then a follow-up interview was carried out over the phone or face-to-face. Project leaders were asked to give detailed information on the development of their practice programmes, on the success factors of, barriers to and facilitators of their implementation and on cooperation across policy areas (see tables below).

Table 2 Form for confirmation of already collected information on practice examples

Information on the content of the programme	Confirmation/additions to the content of the programme
<p>We have collected information on your programme, [*****], from information in the literature, from the internet and/or from involved experts. This information is summarised below. INFO INSERTED FROM TABLES FROM INTERIM REPORT FOR EACH PROGRAMME.</p>	
<p>Could you please confirm the correctness of our information or correct it if needed?</p>	<p>Click here to enter text.</p>
<p>Could you please add any extra information you have on your programme? Please provide us with any kind of documentation.</p>	
<p>Is an evaluation or assessment planned? Are results regularly reported?</p>	

Table 3 Questionnaire for description of practice examples

Questions	Answers
<p>Could you provide us with information on the development of your programme, [*****], for instance:</p> <ul style="list-style-type: none"> ▪ What are the objectives of the programme? ▪ Who was/were involved (partners/actors) in the development of the programme? ▪ Is the programme targeted at specific types of cancer or at all cancers? ▪ Is it targeted at specific workers or at specific enterprises or sectors? ▪ Who financed the development of the programme? Is it possible for you to give information on the costs of its development? 	
<p>What are the most interesting or innovative features of your programme?</p>	
<p>What are the strengths and weaknesses of your programme, [*****]?</p>	
<p>Where has the programme been applied in practice (it may be a subset of the initial target group or another target group)?</p> <p>What has been done for every stakeholder involved?</p>	
<p>What are the results of the programme? What has been achieved? Were the objectives met?</p>	
<p>What are the success factors (including financial incentives) and facilitators of executing the programme and its implementation (including awareness raising)?</p> <p>What barriers could there be to its implementation?</p>	
<p>From your experience, do you think your programme, [*****], is easily transferable to other groups of workers, countries, companies or circumstances?</p> <p>That is, could the programme easily be used by others? How?</p>	
<p>Which partners/actors are involved in the programme (e.g. occupational physicians and/or occupational experts, HR managers, general physicians)? What are their roles?</p> <p>Is there any cooperation with other partners (e.g. employment services including social security, the treating hospital, an organisation for vocational training, a rehabilitation service, NGOs, etc.)?</p> <p>Do these different partners interact (e.g. the workplace and the health system)?</p>	
<p>Do you have any suggestions for improvements for the programme and its implementation?</p>	

Questions	Answers
In your opinion, what further developments of the programme could be interesting?	
Are any further developments planned?	

The outcomes of the follow-up interviews were processed by the interviewers and were controlled and, if needed, were amended by the project leaders.

1.4 Comparative analysis

The online questionnaire was developed to generate information for a comparative analysis of the examples, including factors that contributed to their success and transferability. A matrix was used to classify the elements of each description to help compare them. Below, the items included in the matrix are presented:

1. Country and context
 - a. Population
 - b. Employment rate
 - c. Retirement age
2. Legislation on sickness
3. Detailed description of the programme
4. Target group of the programme
 - a. Targeting: Cancer type
 - b. Targeting: Specific workers
 - c. Targeting: Specific enterprises/sectors
 - d. Targeting: Gender
 - e. Targeting: Programme applied in practice
5. Development of the programme
 - a. Development of the programme
 - b. Involved partners/actors in the development
 - c. Financial costs of the development
 - d. Objectives of the programme
 - e. Were the objectives of the programme met?
6. Interesting or innovative features
7. Success factors (including financial incentives) and facilitators of implementation (including awareness raising)
 - a. Strengths of the programme
 - b. Weaknesses of the programme
 - c. Success factors (financial incentives)
 - d. Facilitators of implementation (including awareness raising)
8. Transferability
 - a. Other groups of workers
 - b. Other countries
 - c. Other companies
 - d. Other circumstances
9. Parties and actors involved
 - a. Parties and actors involved
 - b. Role of parties and actors involved
 - c. Cooperation with others partners

- d. Interaction between different partners
- 10. Assessment of success
 - a. Results of the programme
 - b. Improvements and future developments

2 Company case studies

2.1 Collection of examples of enterprises that have implemented successful measures for managing the RTW of employees with cancer

Five different methods were used to collect information on examples of enterprises and to briefly describe them.

First, a search for scientific evidence and a search of the grey literature were conducted. We selected examples of support policies, programmes and measures implemented in companies.

Second, we sent an online questionnaire to key persons in BusinessEurope, CanCon, COST (CANWON), ENWHP, the European Trade Union Institute (ETUI), the Federation of International Employers (FedEE), PEROSH and the European Association of Craft, Small and Medium-sized Enterprises (UEAPME). The aim of this questionnaire was to collect examples of enterprises that have implemented successful measures for managing the RTW of employees with (or recovering from) cancer (see Appendices 6.1 and 6.5).

Third, EU-OSHA sent an online questionnaire to national focal points (see Appendices 6.2 and 6.5). The focal points referred us to companies in Denmark, Germany, Ireland and Spain but the companies in these countries did not reply to our emails (except that in Ireland).

Fourth, we performed an internet search, both in English and in Dutch, for good European employers using search terms such as ‘best European employers’ and ‘employer AND absenteeism policy AND cancer’ (in Dutch ‘werkgever AND verzuimbeleid AND kanker’).

Fifth, we asked experts in Belgium, Germany, France, the Netherlands and the UK to provide us with examples of enterprises (see Appendices 6.3 and 6.5).

If enterprises were identified in the literature or internet search through key persons, focal points or experts, we sent follow-up emails and made phone calls to collect more information on the programme in question. For example, when a key person or expert referred us to a company, we sent the company the same questions as those in the online questionnaire that we previously sent to the key persons, focal points and experts.

2.2 Selection of eight practical examples (company case studies)

Based on the overview of the scientific literature and the grey literature, the responses to the online questionnaire sent to key persons, focal points and experts, the internet search and the follow-up emails and phone calls to enterprises, we selected eight good practice examples from four different countries: Belgium, Ireland, the Netherlands and the UK.

The examples of good practice in enterprises that had implemented successful measures for managing the RTW of employees with (or recovering from) cancer were selected on the basis of the following selection criteria:

- They showed a particularly comprehensive approach, for example:
 - they targeted multiple stakeholders, including employees, employers, the self-employed, HR managers, family members, healthcare providers and/or other stakeholders, with the aim of enhancing collaboration between the parties involved;
 - they had multiple modalities, for example education, training, support, sport programme, etc.
- They presented typical, innovative practices, for example:
 - they included a plan or programme tailored to the patient;
 - they targeted vulnerable groups, for example the unemployed.
- They covered a range of companies differing in size; for example, international companies and SMEs.

- They covered a range of companies from different sectors; for example, the private and public sectors, the healthcare sector, the financial sector, the production sector, the ICT sector, the industrial sector or the service sector.
- They showed diversity across the Member States, such as differences in OSH systems and approaches.
- They had a programme or measure already in place.

2.3 Data collection (company case studies)

More detail on each company case study was collected through interviews with four different stakeholder groups:

1. HR personnel
2. the worker affected by cancer
3. the trade union representative or a representative of the works council (OR) and/or
4. the OHP.

First, the list of topics was discussed with EU-OSHA. Second, the interviewers were trained so that they were familiar with the list of topics and to give them chance to practise interviewing. The interviews were semi-structured, using a thematic interview guide to ensure that all of the topics were discussed with the stakeholders (see Appendix 6.4). The four stakeholder groups were interviewed separately to ensure that the statements obtained were as valid as possible. Interviews were conducted on site or over the phone. In three companies, only face-to-face interviews were conducted. In two companies, both face-to-face and phone interviews were conducted. In five companies, only interviews over the phone were conducted. All of the interviews took place in the native language of the interviewees.

Both the face-to-face and the phone interviews were audiotaped. The data from the interviews were transcribed verbatim and translated if necessary.

2.4 Comparative analysis

A comparative analysis was performed by grouping the companies' answers according to the different themes of the interview guide, providing an overview of the similarities and contradictions between these companies. An overview of the different stakeholders' points of view on each topic is described (see Appendix of the report Rehabilitation and Return to Work after Cancer):“

3 Focus groups

3.1 Selection of countries

Four countries were selected for this qualitative research. The countries were selected because their policies, systems, programmes or instruments for the rehabilitation and RTW of cancer patients were considered representative and covered a wide range of (work-related) cancers and enterprises (including SMEs).

3.2 Selection of focus group participants

One focus group was formed in each country. The aim was that each focus group had at least seven participants. Eligible participants were indicated by the experts of the Consortium, EU-OSHA and the focal points of the four countries.

The participants invited were experts who:

- had experience in rehabilitation/RTW policies, strategies and programmes and, if possible, the policy context in their country;
- had knowledge of how the policies, strategies and programmes were operating or operated.

The types of participants that were of interest for the focus groups were:

- OSH service providers;
- labour inspectors;
- safety technicians;
- occupational health services;
- HR managers;
- healthcare providers;
- government representatives working on issues related to:
 - OSH and cancer patients, OSH policies and/or policies targeting this population (in the field of employment and OSH);
 - workplace health promotion;
 - social security/pensions;
- trade union representatives, in particular those who focus on OSH issues and/or workers affected by cancer (from both cross-sectoral and sectoral organisations);
- employer representatives, in particular those who focus on OSH issues and/or workers affected by cancer (representing different sectors and companies of different sizes);
- national agencies focused on OSH risks, working conditions and/or employment;
- national research institutes focused on OSH risks, working conditions and/or employment;
- networks/NGOs.

The aim was to involve participants of as many different types as possible. After agreeing on the list of participants, the venue was determined. Subsequently, an email was sent out to inform the eligible participants and to set a date.

3.3 Focus group sessions

Focus groups were the most appropriate format for the discussion, as they enabled a number of stakeholders, representing diverse groups, to come together to discuss several issues. Lively but controlled discussions were moderated by experienced facilitators and someone with relevant OSH expertise who also took structured notes. The focus group sessions lasted for three hours and the language used was the native language of each country/province. All participants were asked for written informed consent for the focus group discussions to be audiotaped. The research question of each focus

group was: what are the barriers to and facilitators of a RTW programme of workers diagnosed with cancer, and what are the requirements for the success of these programmes?

During the focus group sessions, two additional questions were asked to help formulate an answer to the research question:

1. What are your experiences of programmes and initiatives for rehabilitation and RTW after cancer?
 - Why do they work well?
 - What are the success factors in these programmes and initiatives?
 - What could be improved?
 - policy level (e.g. accommodations have to be made);
 - legislation (e.g. paid sick leave);
 - occupational health services (e.g. mandatory in each company, knowledge regarding cancer and work issues);
 - healthcare (e.g. advice of the GP or treating physician);
 - workplace (HR, colleagues, supervisors, employers or workplace accommodations);
 - cooperation between stakeholders (e.g. between OHP and employer).
2. What are the requirements for and obstacles to the success of programmes and initiatives for rehabilitation and RTW after cancer?
 - policy level (e.g. accommodations have to be made);
 - legislation (e.g. paid sick leave);
 - occupational health services (e.g. mandatory in each company, knowledge regarding cancer and work issues);
 - healthcare (e.g. advice of the GP or treating physician);
 - workplace (HR, colleagues, supervisors, employers or workplace accommodations);
 - cooperation in legal issues;
 - cooperation between stakeholders (e.g. between OHP and employer).

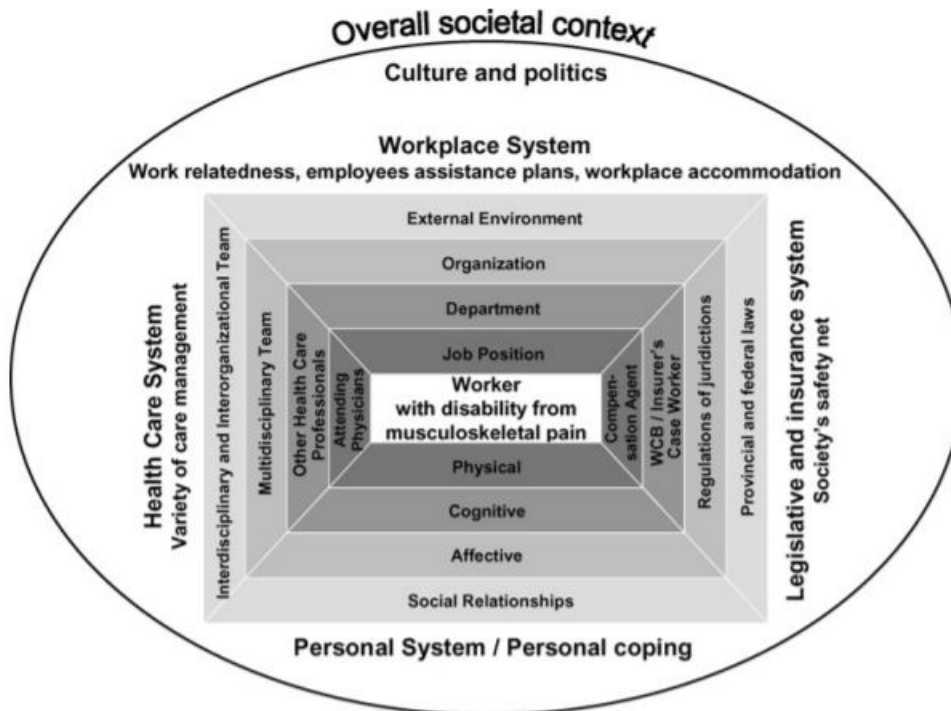
3.4 Data analysis

The data from the focus groups were recorded and transcribed verbatim. They were coded using the MAXQDA (VERBI Software GmbH) qualitative data analysis software package. Open codes were administered to the focus group data by adding labels that represent the text as closely as possible. The labels were divided into two tables, which represented 'facilitators of and barriers to implementing programmes', on the one hand, and 'requirements for success of programmes', on the other hand.

In each table, the labels were subdivided into themes according to the ecological/case management (possible levels of management of a case of one individual) model (Sherbrooke model, see Figure 1). The Sherbrooke model was originally developed to represent the RTW process of workers with work disability due to musculoskeletal pain, but it can also be used as a model for RTW after other diseases. The underlying idea of the model is that RTW consists of multi-determinants that have an impact on the RTW process, and RTW should be understood in a systematic context that considers the interplay between the macro-system (societal context, culture and politics), the meso-system (workplace, healthcare, legislative and insurance system) and the micro-system (the worker). The model also highlights the fact that several stakeholders are involved, each with their own understanding of RTW and its expected outcomes. After encoding the interviews in MAXQDA using the Sherbrooke model as the coding model, the classification of the coding tree was discussed until a consensus was reached.

The focus groups were comparatively analysed according to the Sherbrooke model. However, the complete model was not used. 'Compensation agent', 'insurer's case worker', 'cognitive personal system' and 'multidisciplinary team' were not mentioned during the focus groups. On the basis of this comparative analysis, conclusions and policy recommendations were developed.

Figure 1 Sherbrooke model or ecological/case management model



Source: Loisel et al., 2005. Published with prior permission of the publisher (Springer Nature).

4 EU-OSHA seminar to discuss the findings

In a one-day EU-OSHA stakeholder seminar, the project was explained and the draft final results were presented and discussed with 35 participants. This seminar took place on 5 October 2017.

The different approaches, instruments and practices were compared, challenges and success factors were examined and the transferability of the examples of instruments and practices was discussed.

5 References

EU-OSHA, 'Rehabilitation and return to work after cancer – Literature review', *Publications Office of the European Union*, Luxembourg, 2017, available at: <https://osha.europa.eu/en/tools-and-publications/publications/rehabilitation-and-return-work-after-cancer-literature-review/view>

Loisel P., Buchbinder R., Hazard R., Keller R., Scheel I., van Tulder M. and Webster B. , 'Prevention of work disability due to musculoskeletal disorders: the challenge of implementing evidence', *Journal of Occupational Rehabilitation*, Vol. 15, No 4, 2005, pp. 507-524.

6 Appendix

6.1 Responses from key persons regarding the company case studies

The responses from the key persons from BusinessEurope, CanCon, COST (CANWON), ETUI and UEAPME are outlined below.

- CanCon

CanCon could not find examples of successful measures or programmes for managing the RTW of employees diagnosed with cancer. It recommended that we ask the French expert.

- COST (CANWON)

The Bosnian representative responded, but could not find examples of successful measures or programmes for managing the RTW of employees diagnosed with cancer.

- BusinessEurope, ETUI and UEAPME (social partners)

BusinessEurope found two examples (C24 in Spain and another company located in the USA).

ETUI found four examples of successful measures or programmes for managing the RTW of employees diagnosed with cancer (C33, C34, C35 and C36).

UEAPME could not find examples of successful measures or programmes for managing the RTW of employees diagnosed with cancer.

6.2 Responses from national focal points regarding the company case studies

- Czech Republic

The Czech focal point could not find examples of successful measures or programmes for managing the RTW of employees diagnosed with cancer.

- Denmark

The Danish focal point found one example of a successful measure or programme for managing the RTW of employees diagnosed with cancer (C19).

- Estonia

The Estonian focal point could not find examples of successful measures or programmes for managing the RTW of employees diagnosed with cancer.

- Finland

The Finnish focal point could not find examples of successful measures or programmes for managing the RTW of employees diagnosed with cancer. Together with social partners, they recommended that we contact FIOH and the Finnish Work Environment Fund. We did, but we received no reply.

- Germany

The German focal point found one example of a successful measure or programme for managing the RTW of employees diagnosed with cancer (C22).

- Hungary

The Hungarian focal point could not find examples of successful measures or programmes for managing the RTW of employees diagnosed with cancer. It recommended that we contact the Hungarian League Against Cancer. An email was sent but we received no reply.

- Ireland

The Irish focal point found two examples of successful measures or programmes for managing the RTW of employees diagnosed with cancer (C14 and C27).

- Latvia

The Latvian focal point could not find examples of successful measures or programmes for managing the RTW of employees diagnosed with cancer.

- Lithuania

The Lithuanian focal point could not find examples of successful measures or programmes for managing the RTW of employees diagnosed with cancer.

- Malta

The Maltese focal point could not find examples of successful measures or programmes for managing the RTW of employees diagnosed with cancer.

- Portugal

The Portuguese focal point could not find examples of successful measures or programmes for managing the RTW of employees diagnosed with cancer.

- Spain

The Spanish focal point found several examples, but only one was a successful measure or programme for managing the RTW of employees diagnosed with cancer (C23). This focal point provided us with a filled-in questionnaire.

- Switzerland

The Swiss focal point could not find examples of successful measures or programmes for managing the RTW of employees diagnosed with cancer.

6.3 Responses from experts regarding the company case studies

The responses received from experts in Belgium, France, Germany, the Netherlands and the UK are outlined below.

6.3.1 Belgium

- Occupational health therapist specialised in oncological patients

They found one example of a successful measure or programme for managing the RTW of employees diagnosed with cancer (C18).

- Professor in medical and health psychology (specialised in RTW and clinical psychology)

They found three examples of successful measures or programmes for managing the RTW of employees diagnosed with cancer (C29, C30 and C32).

- Representative from the consultancy Act Desiron specialised in RTW

He found one example of a successful measure or programme for managing the RTW of employees diagnosed with cancer (C31).

6.3.2 France

- Aract Aquitaine

It found two examples of successful measures or programmes for managing the RTW of employees diagnosed with cancer (C20 and C21).

6.3.3 Germany

- Experts of the German Social Accident Insurance (DGUV)

They could not offer data from companies regarding successful practice examples.

6.3.4 The Netherlands

- Care for Cancer

It could not find examples of successful measures or programmes for managing the RTW of employees diagnosed with cancer.

- ArboNed (the national occupational health service for advice and counselling in the field of occupational circumstances and absenteeism)

It could not find examples of successful measures or programmes for managing the RTW of employees diagnosed with cancer.

- Netherlands Center for Occupational Diseases (NCvB)

It could not find examples concerning successful measures or programmes for managing the RTW of employees with a diagnosis of cancer.

- Leven met Kanker

It found two examples of successful measures or programmes for managing the RTW of employees diagnosed with cancer (C4 and C2).

- Stap.nu (a reintegration bureau for workers diagnosed with cancer and other chronically ill workers)

It could not find examples of successful measures or programmes for managing the RTW of employees diagnosed with cancer.

- Dutch Cancer Fund

It found four examples of successful measures or programmes for managing the RTW of employees diagnosed with cancer (C10, C11, C13 and C12).

- A private OHP specialised in cancer patients

They found two examples of successful measures or programmes for managing the RTW of employees diagnosed with cancer (C2 and C1).

- 23 OHPs (specialised in oncology)

12 OHPs replied. None of those that replied could find examples of successful measures or programmes for managing the RTW of employees diagnosed with cancer.

- Re-turn

It found four examples of successful measures or programmes for managing the RTW of employees diagnosed with cancer (C3, C9, C25 and C26).

- Researcher on cancer and work issues with employers

They found three examples of successful measures or programmes for managing the RTW of employees diagnosed with cancer (C5, C7 and another example not worth including).

- 19 occupational health services

Three services replied. Between them they found one example of a successful measure or programme for managing the RTW of employees diagnosed with cancer (C8).

- oPuce

It found one example of a successful measure or programme for managing the RTW of employees diagnosed with cancer (C1).

6.3.5 UK

- Macmillan

It was not able to provide the names of companies that had demonstrated successful measures or programmes for managing the RTW of employees diagnosed with cancer.

- Maggie's

It was not able to provide the names of companies that had demonstrated successful measures or programmes for managing the RTW of employees diagnosed with cancer.

- Researchers on cancer and work in Scotland

They could not find examples of successful measures or programmes for managing the RTW of employees diagnosed with cancer.

- Researchers on cancer and work in England

They found four examples of successful measures or programmes for managing the RTW of employees diagnosed with cancer (C15, C16, C17 and C28).

6.4 Interview schedule regarding the company case studies

6.4.1 Interview schedule (supervisor, line manager or HR manager)

Topics to be covered

1. Practices used
2. How and where workers access support
3. Advice and information
4. Potential barriers to and facilitators of successful implementation, such as legislation
5. Financial incentives and information
6. Factors that contribute to the success of the activity
7. Project organisation
8. Transferability to other enterprises
9. Features of cooperation and partnerships

GUIDE: Opening the interview

Interviewer:

- Opens the interview and welcomes the participant.
'Welcome <name of stakeholder>. We are really pleased about this opportunity to interview you about your programme for managing the RTW of workers diagnosed with cancer.'
- Introduces him-/herself and lets the participant introduce him-/herself.
'I will briefly introduce myself, my name is Liz Smith and I work at Salford University. Together with Angela de Boer and Inge Braspenning from the Academic Medical Center in Amsterdam (Coronel Institute of Occupational Health), I'm working on this project and I will conduct the interviews at enterprises in the UK and Ireland.'
'I will briefly introduce myself, my name is Inge Braspenning and I work at the Academic Medical Center in Amsterdam (Coronel Institute of Occupational Health). Together with my supervisor Angela de Boer, also from the AMC, and with a project partner in the UK, I'm working on this project and I will conduct the interviews at enterprises in the Netherlands and Belgium.'
'Could you introduce yourself?'

- Explains the subject and aim of the interview.
'<Salford University/AMC Amsterdam (Coronel Institute of Occupational Health)> is involved in a European research project commissioned by EU-OSHA (European Agency for Safety and Health at Work). The project will provide more insight into the problems encountered by workers affected by cancer and their employers, and will provide recommendations for enterprises, using examples of policies and programmes already in place.'
'In this project, we have first identified ongoing programmes in enterprises for managing the RTW of workers in Europe. To get a better insight into the success factors and obstacles of the implementation of these different programmes, we asked eight enterprises if we could interview people in their enterprise (four different stakeholder groups per enterprise).'
- Clarifies the structure of the interview and informs the participant of the length of the interview (about 1-1.5 hours).
'I will ask you several questions regarding the programme in your enterprise. These questions cover the following subjects: the practices used, how and where you access support for your programme, advice and information, potential barriers to and facilitators of successful implementation such as legislation, financial incentives and information, factors that contribute to the success of the activity, project organisation, whether this programme could be implemented in other enterprises, and features of cooperation and partnerships. The interview will last about 1-1.5 hours.'
- Stresses the confidentiality of the information obtained from the participant. Explains to the participant that the information collected will remain confidential and that no individual names will be used for any purpose, and that all of the information will be grouped together and depersonalised when the report is written.
'We want to assure you of the confidentiality of this interview. The interviews will be audiotaped. I have asked you for informed consent by email.'
<If no reply and/or no signed informed consent has been received via email: 'Did you receive the informed consent? Is everything clear? Would you like to sign the informed consent?>
<When the participant's signed informed consent is received: 'Thank you for signing the informed consent, we have received this by email. Is everything clear to you?>
'In addition we would like to ask you if the name of your enterprise can be used.'
'Our conversation will be typed up and given a code number and will not be provided to third parties without your permission and can only be viewed by the research team. Personal data will never be used in study documentation, reports or publications or for insurance purposes.'

GUIDE: Starting the interview

[Ice breaker]

Opening sentence:

'I would like to first ask you some questions about your work and your work-related background. Then I will ask some more specific questions relevant to the programme in your enterprise for cancer survivors on managing RTW. I would also like to say once again how pleased we are to interview you about this programme.'

- *What is your function (supervisor/line manager/HR manager)? How many years have you been working in this position?*
- *In which organisation/department (type/aim/mission) are you employed?*

[1. Practices used]

'Now I want to ask you something about the possible practices used to execute the programme. Your programme has multiple modalities, e.g. <online information, consultations with the worker, in-company training courses>.'

- *Could you confirm whether this information is complete?*
- *Could you tell me about more examples of workers who have used the programme?*
- *Could you describe a concrete case of a worker who has used the programme?*
- *What do you need to execute the programme (organisational and practical adjustments)?*

[2. How and where your company accesses support]

- *What is the management team's view of this programme?*

- *Who are the internal partners working on this programme (e.g. supervisor/line manager/HR manager, worker, trade union or OHP)?*
- *Do any external parties support your programme?*

[3. Advice and information]

- *How do you inform the workers in your enterprise about this programme?*
- *Which workers will be advised to join the programme?*
- *Is the programme targeted at specific workers?*
- *Do you provide information about your programme (written or audio material)?*

[4. Potential barriers to and facilitators of successful implementation, such as legislation]

- *What are the success factors and facilitators of the implementation of the programme?*
- *What are the barriers to the implementation of the programme?*
- *Do you have to consider any form of legislation/law to execute this programme?*
- *In the implementation phase, what have you done with respect to awareness raising?*
- *What factors do you believe could make the current national-level policy more successful in the RTW of cancer survivors?*

[5. Financial incentives and information]

- *How would your company benefit from the programme?*
- *What are the financial incentives/reasons for your company to provide this programme?*

[6. Factors that contribute to the success of the activity]

- *Do you evaluate the programme (an assessment for, for example, employees)? How?*
- *How successful has this programme been? Why?*
- *What factors do you believe could make this programme more successful?*
- *Do you have any suggestions for improvements to the programme?*
- *In your opinion, what kind of further developments could be interesting to make the programme more successful?*
- *What effects caused by this programme are considered the most important or gain the most attention? Why?*

[7. Project organisation]

- *Who is/are responsible for the execution of the programme?*
- *What is/are their roles?*

[8. Transferability to other enterprises]

- *Do you think your programme is easily transferable to other enterprises?*
- *Do you think your programme is easily transferable to other countries?*
- *What would you suggest to other enterprises/countries implementing this programme in their enterprise?*
- *What characteristics of this programme, and its success factors and obstacles, are specific to your national context, and which could possibly be transferred to other countries (as an example of best practice)?*
- *How well do you think these programmes can cover the whole working population of cancer survivors that will return to work? Why?*

[9. Features of cooperation and partnerships]

- *Is there any cooperation with other partners (e.g. employment services including social security, the treating hospital, an organisation for vocational training, a rehabilitation service, NGOs, etc.)?*
- *Do these different partners interact?*
- *Are there any partners with which it could be useful to cooperate in the future?*

GUIDE: Closing

- Thank the participant for his/her time. Emphasise that you/we very much appreciate his/her participation and cooperation. Ask the participant whether he/she has any questions.
Text
- Ask the participant whether he/she would like to be informed of the results of the interviews (available in 2017).

Text

- Let the participant know how to get in touch with you, if necessary, after the interview.

Text

6.4.2 Interview schedule (workers)

Topics to be covered

1. What practices have you been involved in?
2. How and from whom are you receiving support?
3. Advice and/or information in relation to the measure
4. Experiences and views on the measure (e.g. facilitators for taking part in the activity)
5. Barriers to and facilitators of successful implementation, such as legislation
6. Financial incentives and available information
7. Transferability to other enterprises

GUIDE: Opening the interview

Interviewer:

- Opens the interview and welcomes the participant.
'Welcome <name of stakeholder>. We are really pleased that we have the opportunity to interview you about your experiences of the programme for managing the RTW of workers diagnosed with cancer in <name enterprise>.'
- Introduces him-/herself and lets the participant introduce him-/herself.
I will briefly introduce myself, my name is Liz Smith and I work at Salford University. Together with Angela de Boer and Inge Braspenning from the Academic Medical Center in Amsterdam (Coronel Institute of Occupational Health), I'm working on this project and I will conduct the interviews at enterprises in the UK and Ireland.'
'I will briefly introduce myself, my name is Inge Braspenning and I work at the Academic Medical Center in Amsterdam (Coronel Institute of Occupational Health). Together with my supervisor Angela de Boer, also from the AMC, and with a project partner in the UK, I'm working on this project and I will conduct the interviews at enterprises in the Netherlands and Belgium.'
'Could you introduce yourself?'
- Explains the subject and aim of the interview.
'<Salford University/AMC Amsterdam (Coronel Institute of Occupational Health)> is involved in a European research project commissioned by EU-OSHA (European Agency for Safety and Health at Work). The project will provide more insight into the problems encountered by workers affected by cancer and their employers, and will provide recommendations for enterprises, using examples of policies and programmes already in place.'
'In this project, we have first identified ongoing programmes in enterprises for managing the RTW of workers in Europe. To get a better insight into the success factors and obstacles of the implementation of these different programmes, we asked eight enterprises if we could interview people in their enterprise (four different stakeholder groups per enterprise).'
- Clarifies the structure of the interview and informs the participant of the length of the interview (about 1-1.5 hours).
'I will ask you several questions regarding the programme. I will focus on which practices you are or have been involved in, where and how you are receiving support, advice and/or information in relation to the measure, and your experiences and views on the measure, such as the facilitators of taking part in the activity, barriers to and facilitators of successful implementation such as legislation, financial incentives and available information, and whether this programme could be implemented in other enterprises. The interview will last about one hour.'
- Stresses the confidentiality of the information obtained from the participant. Explains to the participant that the information collected will remain confidential and that no individual names will be

used for any purpose, and that all of the information will be grouped together and depersonalised when the report is written.

'We want to assure you about the confidentiality of this interview. The interviews will be audiotaped. I have asked you for informed consent by email.'

<If no reply and/or no signed informed consent has been received via email: 'Did you receive the informed consent? Is everything clear? Would you like to sign the informed consent?'>

<When the participant's signed informed consent is received: 'Thank you for signing the informed consent, we have received this by email. Is everything clear to you?'>

'In addition we would like to ask you if the name of your enterprise can be used.'

'Our conversation will be typed up and given a code number and will not be provided to third parties without your permission and can only be viewed by the research team. Personal data will never be used in study documentation, reports or publications or for insurance purposes.'

GUIDE: Starting the interview

[Ice breaker]

Opening sentence:

'I would like to first ask you some questions about your work and your work-related background. Then I will ask some more specific questions relevant to the programme on managing RTW. I would also like to once again say how pleased we are to interview you about your programme.'

- *What is your function (worker)? How many years have you been working in this position?*
- *In which organisation/department (type/aim/mission) are you employed?*

'If I understand correctly, you have had a disease that has affected your work ability. To support your return to work, you followed programme <X>.'

- *Is this correct?*
- *Could you tell me more about your work experience or knowledge of the programme?*

[1. What practices have you been involved in?]

'The programme has multiple modalities, e.g. <online information, consultations with the worker, in-company training courses>.'

- *In which have you participated?*
- *Which modality do you identify as the most useful?*
- *Who is helping you with these modalities?*
- *What do you need to participate in the programme?*

[2. How and from whom are you receiving support?]

- *From whom at work are you receiving support with respect to your disease?*
- *How do you get this support?*
- *From whom are you receiving support with respect to return to work? How?*
- *From whom are you receiving support for your participation in this programme? How?*

[3. Advice and/or information in relation to the measure]

- *Have you been informed about this programme? How? When? By whom?*
- *Did you get any advice with respect to this programme? From whom?*
- *Did your colleagues/supervisor/HR manager know about this programme and your participation? Are they involved in the programme?*

[4. Experiences and views on the measure (e.g. facilitators of taking part in the activity)]

- *What are the success factors and facilitators of taking part in this programme?*
- *What could be improved?*
- *Would you consider taking part in this programme if you could make the choice again?*
- *What is your opinion of the programme? Would you recommend it to other people who have a disease that affects their work ability?*
- *What different actors play a role in the programme?*
- *Do they communicate well with each other?*

[5. Barriers to and facilitators of successful implementation, such as legislation]

- *What do you think of the RTW opportunities allowed/encouraged by the policy of the company you are working for?*

[6. Financial incentives and available information]

- *How would you benefit from the programme?*
- *Do you have financial incentives?*

[7. Transferability to other enterprises]

- *Do you think this programme would work in other enterprises?*
- *Do you think this programme would work in other countries?*
- *Do you think this programme would work in other circumstances?*

GUIDE: Closing

- Thank the participant for his/her time. Emphasise that you/we very much appreciate his/her participation and cooperation. Ask the participant whether he/she has any questions.
Text
- Ask the participant whether he/she would like to be informed of the results of the interviews (available in 2017).
Text
- Let the participant know how to get in touch with you, if necessary, after the interview.
Text

6.4.3 Interview schedule (trade unions)

Topics to be covered

1. What practices are in place or have you been involved in?
2. How and from whom are you receiving support?
3. Advice and/or information in relation to the measure
4. Experiences and views on the measure (e.g. facilitators of taking part in the activity)
5. Barriers to and facilitators of successful implementation, such as legislation
6. Financial incentives and available information
7. Transferability to other enterprises

GUIDE: Opening the interview

Interviewer:

- Opens the interview and welcomes the participant.
'Welcome <name of stakeholder>. We are really pleased about this opportunity to interview you about your programme for managing the RTW of workers diagnosed with cancer.'
- Introduces him-/herself and lets the participant introduce him-/herself.
'I will briefly introduce myself, my name is Liz Smith and I work at Salford University. Together with Angela de Boer and Inge Braspenning from the Academic Medical Center in Amsterdam (Coronel Institute of Occupational Health), I'm working on this project and I will conduct the interviews at enterprises in the UK and Ireland.'
'I will briefly introduce myself, my name is Inge Braspenning and I work at the Academic Medical Center in Amsterdam (Coronel Institute of Occupational Health). Together with my supervisor Angela de Boer, also from the AMC, and with a project partner in the UK, I'm working on this project and I will conduct the interviews at enterprises in the Netherlands and Belgium.'
'Could you introduce yourself?'
- Explains the subject and aim of the interview.
'<Salford University/AMC Amsterdam (Coronel Institute of Occupational Health)> is involved in a European research project commissioned by EU-OSHA (European Agency for Safety and Health at Work). The project will provide more insight into the problems encountered by workers affected by

cancer and their employers, and will provide recommendations for enterprises, using examples of policies and programmes already in place.'

'In this project, we have first identified ongoing programmes in enterprises for managing the RTW of workers in Europe. To get a better insight into the success factors and obstacles of the implementation of these different programmes, we asked eight enterprises if we could interview people in their enterprise (four different stakeholder groups per enterprise).'

- Clarifies the structure of the interview and informs the participant of the length of the interview (about 1-1.5 hours).

'I will ask you several questions regarding the programme in your enterprise. These questions cover the following subjects: the practices used, how and where you access support for your programme, advice and information, potential barriers to and facilitators of successful implementation such as legislation, financial incentives and information, factors that contribute to the success of the activity, project organisation, whether this programme could be implemented in other enterprises, and features of cooperation and partnerships. The interview will last about 1-1.5 hours.'

- Stresses the confidentiality of the information obtained from the participant. Explains to the participant that the information collected will remain confidential and that no individual names will be used for any purpose, and that all of the information will be grouped together and depersonalised when the report is written.

'We want to assure you of the confidentiality of this interview. The interviews will be audiotaped. I have asked you for informed consent by email.'

<If no reply and/or no signed informed consent has been received via email: 'Did you receive the informed consent? Is everything clear? Would you like to sign the informed consent?'

<When the participant's signed informed consent is received: 'Thank you for signing the informed consent, we have received this by email. Is everything clear to you?'

'In addition we would like to ask you if the name of your enterprise can be used.'

'Our conversation will be typed up and given a code number and will not be provided to third parties without your permission and can only be viewed by the research team. Personal data will never be used in study documentation, reports or publications or for insurance purposes.'

GUIDE: Starting the interview

[Ice breaker]

Opening sentence:

'I would like to first ask you some questions about your work and your work-related background. Then I will ask some more specific questions relevant to the programme in your enterprise for cancer survivors in managing RTW. I would also like to say once again how pleased we are to interview you about this programme.'

- *What is your function (trade union representative)? How many years have you been working in this position?*
- *Could you tell me more about your work experience or knowledge of the programme?*

[1. What practices are in place or have you been involved in?]

'The programme has multiple modalities, e.g. <online information, consultations with the worker, in-company training courses>.'

- *In which have you been involved?*
- *Are there modalities in which you think you should have been involved?*
- *Does the company regularly report the results of the programme to you?*
 - <If yes: Do you think this is important?*
 - <If no: Do you think this would be necessary?*

[2. How and from whom are you receiving support?]

- *Do you provide or receive support with respect to cancer and the RTW of employees in this company?*
- *How do you provide or receive this support?*
- *In your opinion, from whom should the company/a worker be receiving support for this programme (e.g. OHP, HR, trade unions, patient organisations)? How?*

[3. Advice and/or information in relation to the measure]

- *How have you (as a trade union) been informed about this programme? By whom?*
- *What do you think of this information?*
- *Have you been asked for advice by the company/a worker with respect to this programme?*

[4. Experiences and views on the measure (e.g. facilitators of taking part in the activity)]

- *In your opinion, what are the success factors and facilitators of taking part in this programme?*
- *What could be improved?*
- *What is your opinion of the programme? Would you recommend this programme to workers diagnosed with cancer?*
- *What different actors play a role in the programme? Do they communicate well with each other?*
- *Do you think cooperation is needed in this programme?*

[5. Barriers to and facilitators of successful implementation, such as legislation]

- *Have you been involved in the implementation of this programme?*
 <If yes: What are the success factors and facilitators of the implementation of the programme?
 What are the barriers to the implementation of the programme?
 <If no: What might be the success factors and facilitators of the implementation of the programme? What might be the barriers to the implementation of the programme?
- *In your opinion, would trade union involvement in the implementation phase be valuable?*

[6. Financial incentives and available information]

- *How would the trade unions benefit from the programme?*
- *Do you have financial incentives?*

[7. Transferability to other enterprises]

- *Do you think this programme is easily transferable to other enterprises, e.g. SMEs?*
- *Do you think this programme is easily transferable to other countries?*
- *Do you think this programme is easily transferable to other circumstances, e.g. cases of work-related cancer?*
- *Which characteristics of this programme, and its success factors and obstacles, are specific to the national context and which could possibly be transferred to other countries (as an example of best practice)?*
- *How well do you think this programme could cover the whole working population of cancer survivors who will return to work? Why?*

GUIDE: Closing

- Thank the participant for his/her time. Emphasise that you/we very much appreciate his/her participation and cooperation. Ask the participant whether he/she has any questions.
Text
- Ask the participant whether he/she would like to be informed of the results of the interviews (available in 2017).
Text
- Let the participant know how to get in touch with you, if necessary, after the interview.
Text

6.4.4 Interview schedule (OHP)

Topics to be covered

1. What practices are in place or have you been involved in?
2. How and from whom are you receiving support?
3. Advice and/or information in relation to the measure
4. Experiences and views on the measure (e.g. facilitators of taking part in the activity)
5. Barriers to and facilitators of successful implementation, such as legislation
6. Financial incentives and available information
7. Transferability to other enterprises

GUIDE: Opening the interview

Interviewer:

- Opens the interview and welcomes the participant.
'Welcome <name of stakeholder>. We are really pleased about this opportunity to interview you about your programme for managing the RTW of workers diagnosed with cancer.'
- Introduces him-/herself and lets the participant introduce him-/herself.
'I will briefly introduce myself, my name is Liz Smith and I work at Salford University. Together with Angela de Boer and Inge Braspenning from the Academic Medical Center in Amsterdam (Coronel Institute of Occupational Health), I'm working on this project and I will conduct the interviews at enterprises in the UK and Ireland.'
'I will briefly introduce myself, my name is Inge Braspenning and I work at the Academic Medical Center in Amsterdam (Coronel Institute of Occupational Health). Together with my supervisor Angela de Boer, also from the AMC, and with a project partner in the UK, I'm working on this project and I will conduct the interviews at enterprises in the Netherlands and Belgium.'
'Could you introduce yourself?'
- Explains the subject and aim of the interview.
'<Salford University/AMC Amsterdam (Coronel Institute of Occupational Health)> is involved in a European research project commissioned by EU-OSHA (European Agency for Safety and Health at Work). The project will provide more insight into the problems encountered by workers affected by cancer and their employers, and will provide recommendations for enterprises, using examples of policies and programmes already in place.'
'In this project, we have first identified ongoing programmes in enterprises for managing the RTW of workers in Europe. To get a better insight into the success factors and obstacles of the implementation of these different programmes, we asked eight enterprises if we could interview people in their enterprise (four different stakeholder groups per enterprise).'
- Clarifies the structure of the interview and informs the participant of the length of the interview (about 1-1.5 hours).
'I will ask you several questions regarding the programme. I will focus on which practices you are or have been involved in, where and how you receive support, advice and/or information in relation to the measures, and your experiences and views on the measure, such as the facilitators of taking part in the activity, the barriers to and facilitators of successful implementation such as legislation, financial incentives and available information, and transferability to other enterprises. The interview last about 1-1.5 hours by phone.'
- Stresses the confidentiality of the information obtained from the participant. Explains to the participant that the information collected will remain confidential and that no individual names will be used for any purpose, and that all of the information will be grouped together and depersonalised when the report is written.
'We want to assure you about the confidentiality of this interview. The interviews will be audiotaped. I have asked you for informed consent by email.'
<If no reply and/or no signed informed consent has been received via email: 'Did you receive the informed consent? Is everything clear? Would you like to sign the informed consent?>
<When the participant's signed informed consent is received: 'Thank you for signing the informed consent, we have received this by email. Is everything clear to you?>
'In addition we would like to ask you if the name of your enterprise can be used.'
'Our conversation will be typed up and given a code number and will not be provided to third parties without your permission and can only be viewed by the research team. Personal data will never be used in study documentation, report or, publications or for insurance purposes.'

GUIDE: Starting the interview

[Ice breaker]

Opening sentence:

'I would like to first ask you some questions about your work and your work-related background. Then I will ask some more specific questions relevant to the programme in your enterprise for cancer survivors in managing RTW. I would also like to say once again how pleased we are to interview you about this programme.'

- *What is your function (OHP)? How many years have you been working in this position?*
- *And specifically in this company?*
- *Could you tell me more about your work experience or knowledge of the programme?*

[1. What practices are in place or have you been involved in?]

'The programme has multiple modalities, e.g. <online information, consultations with the worker, in-company training courses>.'

- *In which have you been involved?*
- *Are there modalities that you think you should be involved?*
- *Does the worker or employer report results or experiences to you? If yes, is this necessary?*

[2. How and from whom are you receiving support?]

- *Do you provide or receive support with respect to cancer and the RTW of employees in this company?*
- *How do you provide this support?*
- *Who initiates the implementation of this programme in your enterprise?*
- *In your opinion, from whom should the company/a worker be receiving support for this programme (e.g. OHP, HR, trade unions, patient organisations)? How?*

[3. Advice and/or information in relation to the measure]

- *How have you (as an OHP) been informed about this programme? By whom?*
- *What do you think of this information?*
- *Have you been asked for advice by the company/a worker with respect to this programme?*

[4. Experiences and views on the measure (e.g. facilitators of taking part in the activity)]

- *In your opinion, what are the success factors and facilitators of taking part in this programme as a worker in collaboration with an OHP?*
- *What could be improved?*
- *What is your opinion of the programme? Would you recommend this programme to people diagnosed with cancer or to other OHPs?*
- *What different actors play a role in the programme? Do they communicate well with each other?*
- *Do you think cooperation is needed in this programme?*

[5. Barriers to and facilitators of successful implementation, such as legislation]

- *Have you been involved in the implementation of this programme?*

<If yes: What are the success factors and facilitators of the implementation of the programme? What are the barriers to the implementation of the programme?

<If no: What might be the success factors and facilitators of the implementation of the programme? What might be the barriers to the implementation of the programme?

- *In your opinion, would the involvement of an OHP in the implementation phase be valuable?*

[6. Financial incentives and available information]

- *How would an OHP benefit from the programme?*
- *Do you have financial incentives?*

[7. Transferability to other enterprises]

- *Do you think this programme is easily transferable to other enterprises, e.g. SMEs?*
- *Do you think this programme is easily transferable to other countries?*
- *Do you think this programme is easily transferable to other circumstances, e.g. work-related cancer?*
- *Which characteristics of this programme, and its success factors and obstacles, are specific to its national context, and which could possibly be transferred to other countries (as an example of best practice)?*
- *How well do you think this programme could cover the whole working population of cancer survivors who will return to work? Why?*

GUIDE: Closing

- Thank the participant for his/her time. Emphasise that you/we very much appreciate his/her participation and cooperation. Ask the participant whether he/she has any questions.
Text
- Ask the participant whether he/she would like to be informed of the results of the interviews (available in 2017).
Text
- Let the participant know how to get in touch with you, if necessary, after the interview.
Text

6.5 Online questionnaire regarding the company case studies

6.5.1 Online questionnaire

EU-OSHA questionnaire: enterprises with successful measures or programmes for managing the RTW of employees diagnosed with cancer

The following gives a brief description of the questionnaire.

Topic: interventions, instruments and practices at enterprises to enhance the RTW of employees diagnosed with cancer.

Aim: to identify examples of enterprises that have implemented successful measures or programmes for managing the RTW of employees diagnosed with cancer.

Instruction: please use Table 1 to provide us with detailed information regarding the enterprise and its measure(s) or programme(s) for managing the RTW of employees diagnosed with cancer.

Table 4 Description of the measures or programmes in enterprises for managing the RTW of employees with (or recovering from) cancer

Description	References, web links, contacts of your enterprise
What is the name of the enterprise?: Click here to enter text.	
What is the aim of the measure or programme?: Click here to enter text.	
Please briefly describe the content of the measure or programme: Click here to enter text.	References, web links, reports, etc., describing or evaluating the intervention:
How many employees does the enterprise have? (SME or micro enterprise?): Click here to enter text.	Click here to enter text.
What is the activity sector of the enterprise or programme?: Click here to enter text.	Contact persons in the enterprise for further information:
Where is the enterprise located (city, country)?: Click here to enter text.	Click here to enter text.
What are the professions of the employees in the enterprise?: Click here to enter text.	

At a later stage, enterprises will be selected and asked to provide further information by phone/interviews and will be asked the following additional questions:

- Which type of cancer (including work-related cancer) does your measure/programme cover?

- Do you think your measure/programme is easily transferable to other circumstances (e.g. country, sector and size class)?
- What organisational and workplace adaptations have been made to implement your measure/programme?
- What partners are involved in the implementation of the measure/programme in your enterprise?
- What partners are involved in the development of the measure/programme in your enterprise?
- Who is responsible for the practical realisation of the measure/programme in your enterprise?
- What are the needs, views and experiences of managers working with the measure/programme in your enterprise?
- What is the consequence of this measure for other employees/colleagues of the employed cancer patients?
- What are the financial costs of the measure/programme in your enterprise?
- What has been helpful in implementing the measure/programme in your enterprise?
- What problems were encountered in the implementation of the measure/programme in your enterprise?

Interviews will cover four different stakeholder groups:

1. employers and OSH technical staff;
2. workers affected by cancer who belong to the target group of the implemented activity;
3. trade unions and worker safety representatives;
4. other experts involved in the process (e.g. physician, HR manager, line manager).

The final output of the questionnaire, phone calls and interviews will provide information regarding specific interventions in enterprises and the views of the different actors at the enterprise level (e.g. health and safety manager, health and safety representative, trade union representative) on drivers and obstacles. This information will help to build a more complete picture of the problems encountered by SMEs and other enterprises and will help to explore the views of those most directly affected.

6.5.2 Template follow-up mail

Dear members of ...,

We would like to inform you of our EU-OSHA project, which focuses on rehabilitation and RTW after cancer (see [call for tender](#)). The project will provide further insight into the problems encountered by workers affected by cancer and their employers, and will provide recommendations for enterprises building on examples of policies already in place. This project is initiated by the European Agency for Safety and Health at Work (EU-OSHA) and is executed by the Coronel Institute of Occupational Health of the Academic Medical Centre (AMC) in Amsterdam, in collaboration with the University of Salford, UK.

We have performed a scientific and grey literature search for successful interventions, and now we are looking for examples of enterprises that have implemented **successful measures or programmes for managing the return to work of employees diagnosed with cancer**. We are also contacting people from ETUI, BusinessEurope, FedEE, CanCon, COST (CANWON), PEROSH and UEAPME to ask them if they have any information.

Should you or anyone in your network know of any examples, we invite you to fill in the attached short questionnaire and please return it to us before **June 13th**. If you do not know of any such successful measures, please provide us with names of organisations which may help us identify cases. We are looking for contact details of enterprises (names and people). We will then contact the enterprises to learn more about their successful measures. We would like to refer to the relevant contact when we start contacting the enterprises.

The successful practice examples may include a variety of workplace sizes, activity sectors, locations, lower socioeconomic groups, both genders and a variety of professions. In addition, the examples may represent different types of cancer and have the potential to be transferable to other circumstances (e.g. country, sector and size class). However, we are particularly interested in examples from micro, small

and medium-sized enterprises (fewer than 250 employees) and in issues of work-related cancer. If you know of more than one example, please copy the table and fill it in as many times as necessary.

If you have any additional questions related to the survey, please do not hesitate to contact me.

We hope you can help us identify successful measures.

We look forward to hearing from you.

Yours faithfully

The European Agency for Safety and Health at Work (EU-OSHA) contributes to making Europe a safer, healthier and more productive place to work. The Agency researches, develops, and distributes reliable, balanced, and impartial safety and health information and organises pan-European awareness raising campaigns. Set up by the European Union in 1994 and based in Bilbao, Spain, the Agency brings together representatives from the European Commission, Member State governments, employers' and workers' organisations, as well as leading experts in each of the EU Member States and beyond.

European Agency for Safety and Health at Work

Santiago de Compostela 12, 5th floor

48003 Bilbao, Spain

Tel. +34 944358400

Fax +34 944358401

E-mail: information@osha.europa.eu

<http://osha.europa.eu>



■ Publications Office