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INVALIDITÉS ÉPISODIQUES

A Report on the 2022 Survey of Certified Human Resources Professionals Regarding Episodic Disabilities



Realize is a national charitable organization working to improve the quality of life of people living with HIV and related conditions through rehabilitation research, education, and cross-sector partnerships. **Realize** members are individuals and organizations that have an interest in HIV, disability and rehabilitation. These include: community-based HIV/AIDS, disability and rehabilitation organizations; national professional associations and individual clinicians; unions; private-sector companies; people living with HIV and other disabilities; health care, social care and human resources professionals; and other people who are interested in HIV, disability and rehabilitation.

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Summary of Key Findings and Recommendations

This report, and its predecessors in 2020 and 2006, was developed as part of an ongoing assessment of the existing knowledge of Human Resources (HR) professionals across Canada about Episodic Disability in the workplace; and the gaps in both training and experience that may be barriers to a culture of accommodation in their work environments. Human Resources professionals across sectors are uniquely positioned to both advocate for employees, and to engage leadership to provide appropriate support to their team members living with Episodic Disability. HR professionals play a pivotal role in ensuring that people living with episodic disabilities are recruited, retained, or are able to return to the workplace should they require time away.

The 2022 Episodic Disability Survey for Human Resources professionals (Appendix 1-2), was designed to gather input on experiences of episodic disability in the workplace, as well as on activities and tools, that support Human Resource Professionals. This information will assist in building awareness and will help inform the creation of a National Action Plan on Episodic Disability and Employment.

As we enter the second full year of the COVID-19 pandemic, questions specific to work from home and policy and accommodations in the context of COVID were added to the 2022 survey. The emerging diagnosis of “long COVID” as a new Episodic Disability is of particular note as it may guide HR discussions nationally on how to provide accommodations using lessons learned from the COVID-19 context.

The ongoing COVID pandemic, the dynamic nature of workplaces, and overall fatigue experienced by HR professionals may have contributed to the low response rate in our survey this year, making comparison to previous years more challenging. Responses were analyzed and compared to the previous survey to update key recommendations and ongoing growth areas.

Key Findings

- While 82% of respondents described having previous knowledge of Episodic Disabilities, only half (50%) attributed this knowledge to training received as part of their role. This is similar to our 2020 results, where 46% of respondents had encountered the term “episodic disabilities” in a formal in-person or online training session
- 80% of respondents reported having accommodated episodic disability in the workplace, and felt they could identify “episodic disability” cases in their workload, a similar proportion to our 2020 survey
- Long term disability (55%) and short-term disability (45%) were described as the most common form of income support, followed by sick leave (36%). This differs from our previous results which showed sick leave as the most common income support.
- Part-time work was again, by far the most commonly type of work accommodation, reported by 73% of respondents, followed by flex-time and work from home
- Over 90% of respondents said that the accommodations resulted in successful return to work
- Levels of training have not changed since our last survey, and most respondents (all but one) had not received any formal training on episodic disabilities in the workplace and how to provide accommodations
- 100% of respondents reported a need for formal Human Resources certification in episodic disabilities; the mix of online (63%), in person (19%) and (18%) hybrid course formats chosen reflects differences in industries and sectors

Recommendations

- Develop a common knowledge base regarding episodic disabilities, e.g., return-to-work policies, cost-benefit analyses of accommodations.
- Strengthen the leadership of HR Professional associations to initiate and implement recommended changes and encourage the hiring of persons living with episodic disabilities.
- Provide relevant, knowledge-specific training opportunities to HR professionals on working with and accommodating employees living with episodic disabilities.
- Modify existing work from home policies developed during the COVID -19 pandemic, to support accommodations for employees with episodic disabilities.
- Champion Human Resources professionals as system navigators, who can act as links between employees, leaders, and knowledge about episodic disabilities

Introduction

What are episodic disabilities?

Episodic disabilities, characterized by periods of illness and wellness, are becoming more prevalent in Canadian society. Increasing numbers of Canadians are living with episodic disabilities. These include cancer, HIV/AIDS, lupus, multiple sclerosis and mental illness. One of the key distinguishing features of episodic disabilities is their unpredictability, which may force workers to involuntarily move in and out of the workforce when they experience alternating periods of good health and disability. Systematic barriers like inflexible workplace practices and rigid disability pension requirements often do not provide the continuous income or extended health supports needed by persons living with episodic disabilities, regardless of whether a person is currently working.

Over the past two years, COVID-19 has created numerous challenges for those living and working with episodic disabilities, and recently, “long COVID”, a group of symptoms following recovery from COVID infection has been added to the growing list of episodic disabilities. The COVID -19 pandemic has provided an unique opportunity to use a nationally mandated response, to shine a light on the need for accommodations for people living with episodic disability.

Realize has been undertaking projects on episodic disabilities and employment for the past 24 years and for those targeted in this work, knowledge has increased significantly. An updated survey was distributed to professional HR organizations in Canada in 2021-2022. This report summarizes the most recent survey responses from HR professionals, and describes their knowledge and experience with accommodating episodic disability, including the proportion of their workload dedicated to disability support. In addition, the report reiterates the need for a consolidated training and certification for HR professionals specifically in episodic disabilities. Building on last year’s findings, the rapid response to COVID restrictions, including work from home policies were explored as a potential point of transition to accommodations for episodic disability.

Survey Overview

As with last year's survey, the survey questions this year targeted national HR professionals on their knowledge and training needs regarding episodic disabilities in the workplace. The most notable change to the survey questions from last year is the additions of questions specific to Human Resources policies and processes within the context of the COVID-19 pandemic.

The responses provided an overview of effective practices currently in place to support and accommodate episodic disabilities, as well as helping to reveal gaps in knowledge, and provide evidence to build a rigorous and cohesive HR training program. The original survey questions were developed by Wendy Porch (former **Realize** Manager, Episodic Disabilities Initiatives) and Melissa Egan (current National Lead at **Realize** on Episodic Disabilities). Questions were modified for this survey by Elizabeth Racz (National Research and Program Officer at **Realize**).

The survey design remained consistent to the previous year, using both discrete (yes/no, multiple choice) and continuous variables to describe knowledge and work practices, as well as open-ended questions to drill down to practices specific to the respondents.

The updated 2022 survey aimed to compare and better understand how the knowledge and training requirements of HR professionals have evolved over the course of the last year, especially within the context of COVID-19. These results would provide **Realize** with the information needed to develop and disseminate up to date training for HR professionals, to help them support their teams and employees with episodic disabilities. As in our 2020 survey, the ongoing COVID-19 pandemic, dynamic work environments and online fatigue, may have contributed to low survey response.

The survey was administered online, in English and French, using *Survey Monkey*, a web-based survey development, data collection and support service. The survey was open for three months, from December 2021- February 2022. A copy of the survey questions is included in Appendix 1(English) and 2 (French) of this report.

Design and Dissemination

The survey was sent to human resource professionals across Canada, via fee-based professional human resource organizations, and through LinkedIn directed advertising. A profile of organizational types and sectors is depicted in Chart 1 and Chart 2 below.

CHART 1: RESPONDENT PROFILE BY ORGANIZATION TYPE

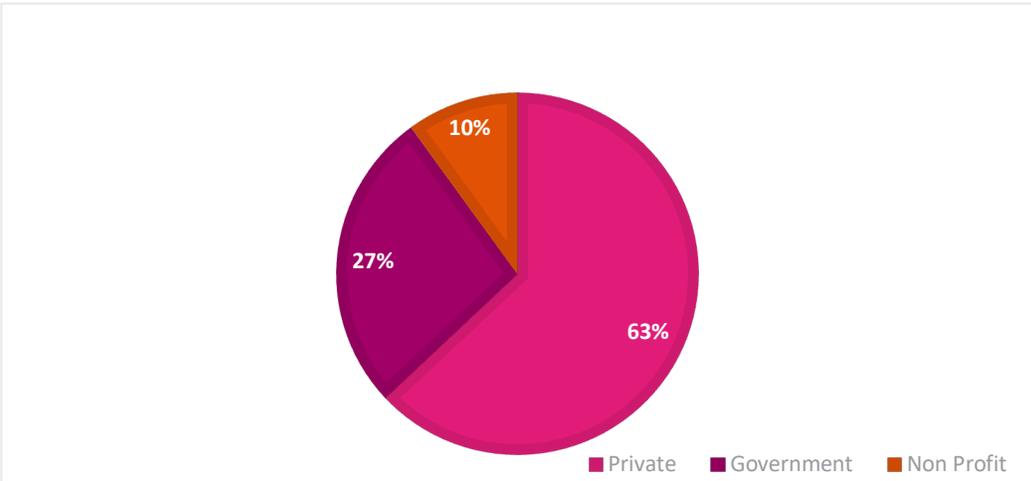
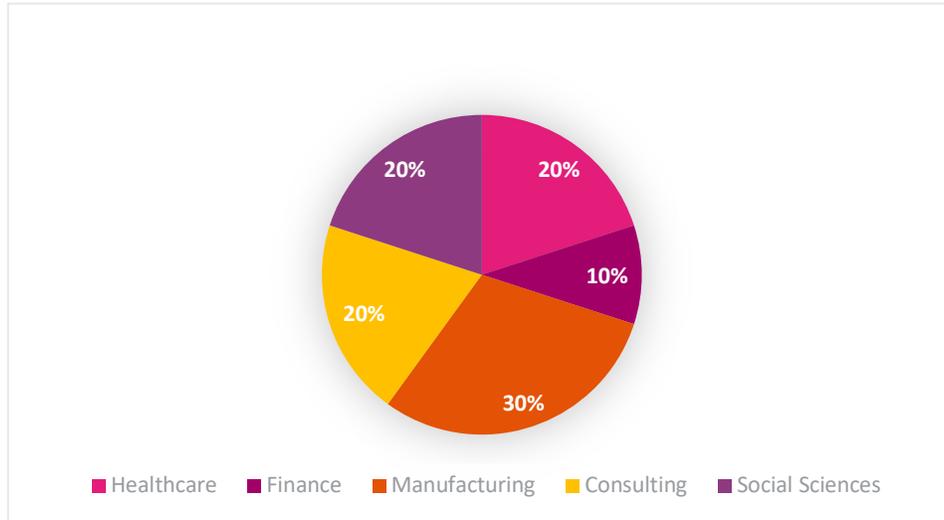


CHART 2: RESPONDENT PROFILE BY SECTOR



Summary of Results

Awareness of the term episodic disability and the definition of the term remained consistent with 83% of respondents reporting having heard the term defined in our 2022 survey, and 80% in our 2020 analysis. Only 18% had not encountered the term before.

CHART 3: AWARENESS OF TERM EPISODIC DISABILITIES

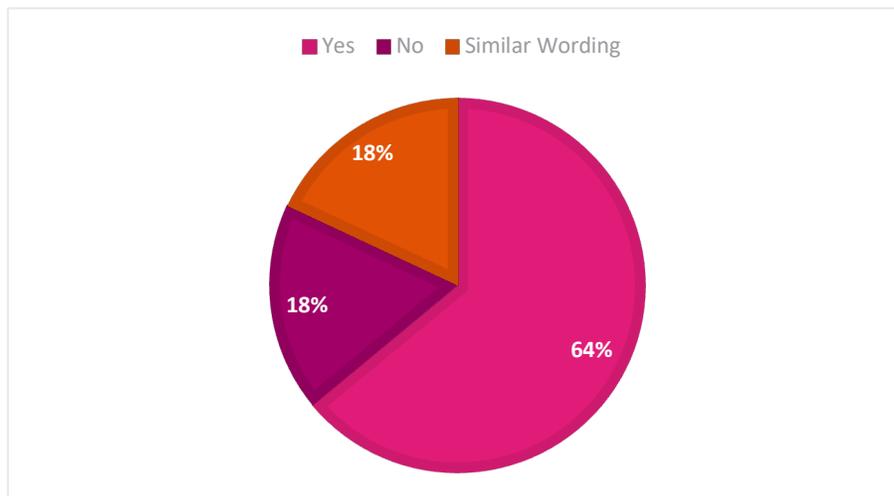
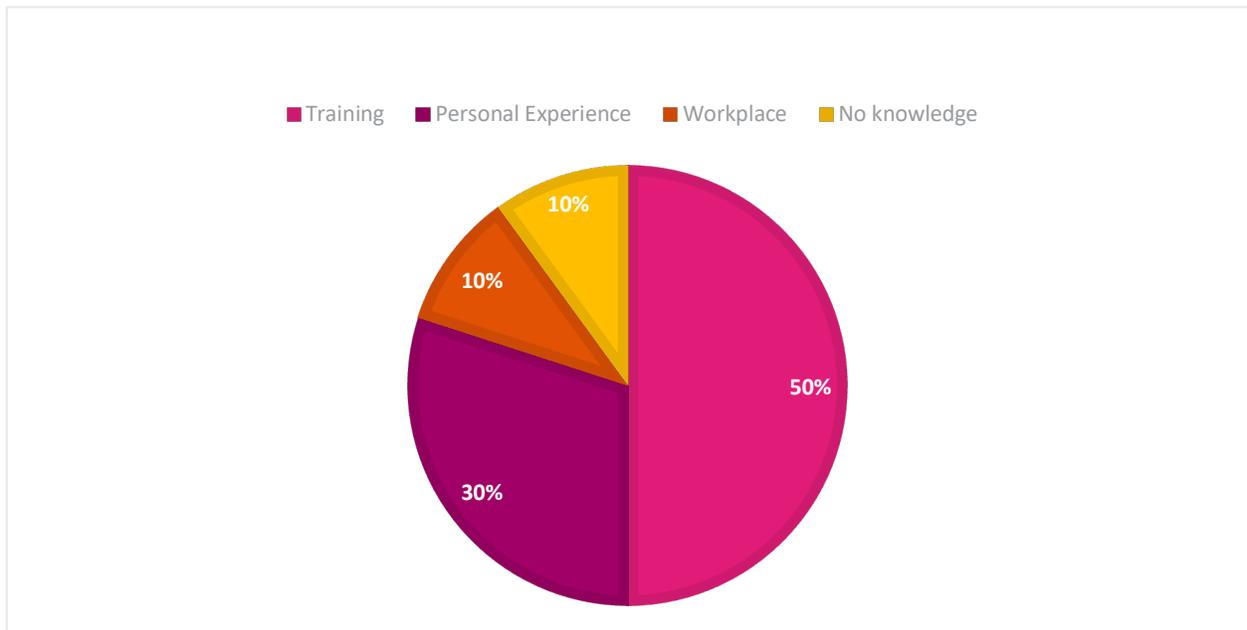


Chart 4 illustrates the most common source of knowledge about episodic disabilities remained formal training (50%), though the second most common (30%) was through personal

experience either from family and friends, or their own living experience of episodic disability. The remainder of respondents described learning from colleagues in the workplace or have little to no knowledge of episodic disabilities.

CHART 4: ENCOUNTERING TERM EPISODIC DISABILITIES



Self-described knowledge levels about episodic disabilities and relevant accommodations varied, though for the most part respondents cite at least some knowledge of episodic disabilities (46%). A further 36% described themselves as knowledgeable, with 9% reporting skilled or expert level of knowledge (Chart 5).

CHART 5: KNOWLEDGE OF ACCOMODATING EPSODIC DISABILITIES IN THE WORKPLACE



Time spent on Disability Claims

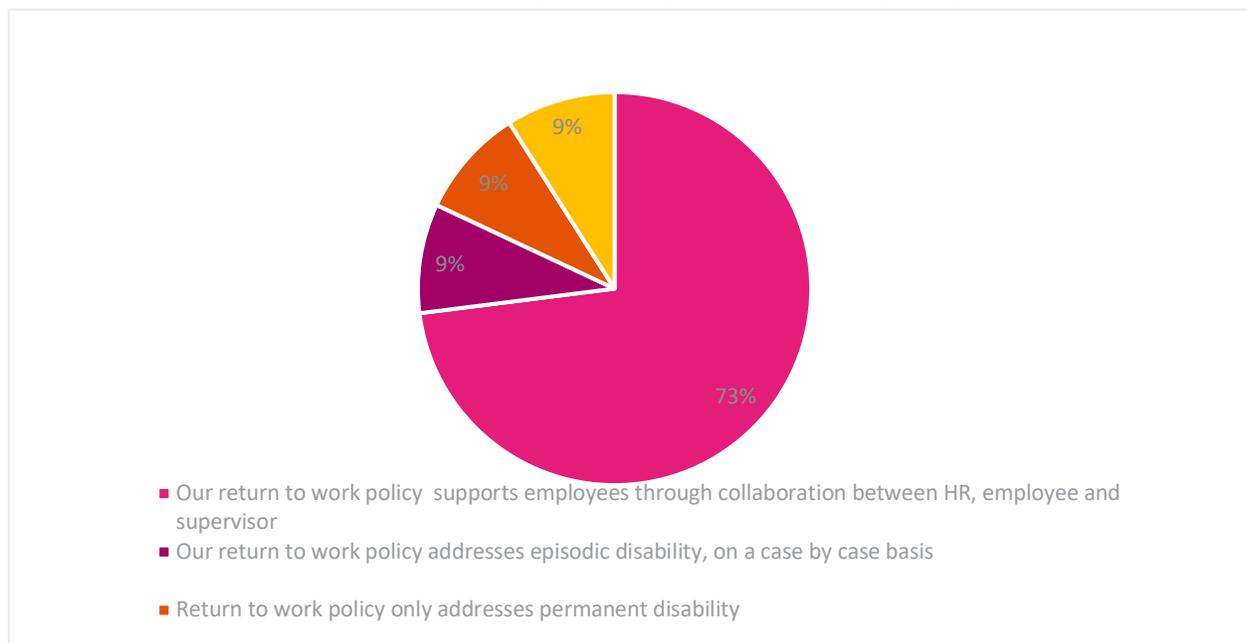
To clarify the levels of engagement overall with disability related claims and specifically episodic disability claims, a group of questions that quantified the time currently spent by HR professionals on disability related work was added in this year's survey. Out of a total of 100% of their total workload, respondents were asked to quantify what proportion was spend on *any* disability related work in an open-ended question. Approximately half of respondents (44%) allocated between 1 and 10% of their time to disability caseload. A further 44% spent between 10 and 30% of their time on disability related worked. Only 12% spend more than half their time (reported as 60%) on disability. The content of the work was described as evenly split between provision of disability supports, episodic disability supports and return to work planning.

While 82% of respondents reported being able to identify episodic disability within their caseload (up from less than half in 2020), when asked to articulate how much time was spent specifically on episodic disability, respondents' replies were varied, often putting permanent and episodic disability in the same category.

Return to Work Planning

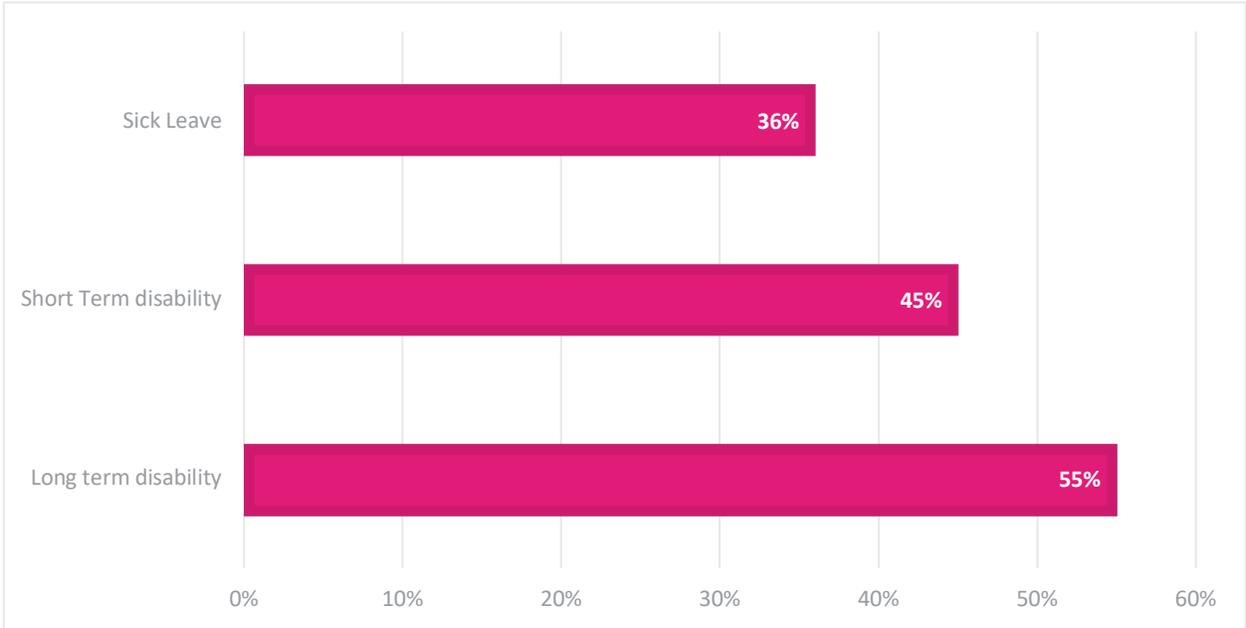
The 2020 HR survey highlighted the need for good return to work policies, and most respondents, (77%) stated their current policies required review. Further, nearly all respondents, (97%) reported no cost benefit analysis of accommodations for episodic disability had been completed by their organizations. In the current survey, a slightly different picture emerged, with 73% of respondents describing return to work for episodic disability as a collaborative effort between the employee, HR professional and supervisor. Other respondents described no specific return to work policy, but that return work was handled on a case-by-case basis (9 %), or that return to work planning was only for permanent disability cases (18%). Encouragingly, over half (55%) of respondents reported a cost benefit analysis of accommodations for episodic disability had been completed at their organization. The results of the cost-benefit analysis showed accommodations are either cost effective (33%) or cost neutral (67%). The results of the return-to-work policy questions are illustrated in Chart 6 below.

CHART 6: RETURN TO WORK POLICY



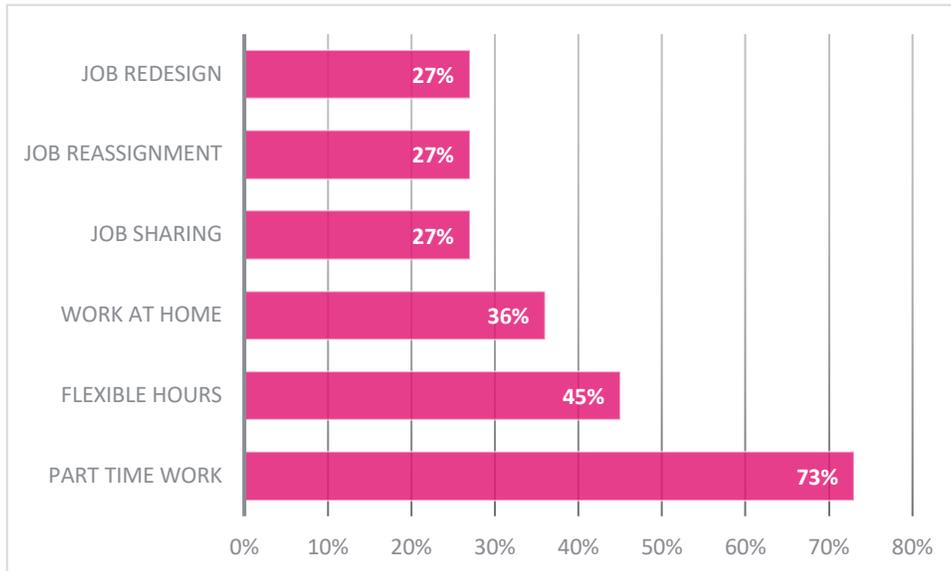
The same combination of income supports is described in our current survey as in 2020, however this iteration shows that long term disability (55%) was the most common form of support provided by HR professionals for people with disabilities. As respondents were given the opportunity to check all income supports, they have provided, these values may show a cumulative support offered, as support progresses from sick leave to short term disability or long-term disability (Chart 7).

CHART 7: INCOME SUPPORT PROGRAMS IN CASES OF EPISODIC DISABILITIES



All surveyed HR professionals described with some form of workplace accommodations when responding to episodic disability. Aligned with our 2020 survey results, our 2022 survey respondents described part-time work (73%) and flexible work hours (45%) as the most common type of accommodations provided, as well as working from home, job sharing, job redesign, or job reassignment. The results are not summative, as respondents were free to choose all forms of accommodations they had offered (Chart 8).

CHART 8: TYPES OF WORKPLACE ACCOMODATIONS



However, no change was observed in the proportion of accommodations requests declined (30%), when compared the 2020 survey. The primary reason provided for declining an accommodation request included lack of program support for accommodations (43%) or inability to provide accommodations within the scope of the role (43%). Prohibitive cost was cited a little less than a third of the time (28%).

Training

There was no significant change in training levels for HR professionals in our 2022 survey when compared to 2020. Respondents answered an open-ended question about training specific to accommodating episodic disabilities; only 11% had formal training, others reported their general HR experience, professional experience and the attendance of workshops or seminars through their careers. Usefulness of the training was not ranked, given the low proportion of professionals who had received any formal training. Despite this result, 100% of the respondents felt that HR certification specific to episodic disabilities would be valuable. Certification training that was provided online (63%) or in hybrid online/ in person format (37%) was most well supported, and consistent with our 2020 results. No respondents wished to receive training concurrently with annual conferences, a change from our previous survey,

which described a third of respondents willing to do training in episodic disabilities in conjunction with an annual conference.

COVID-19 Context

New to the survey this year were questions specific to the policies and practices put in place to respond to the COVID -19 pandemic and its restrictions in the workplace. Work from home policies were developed in the 75% of respondent organizations. These policies included work from home exclusively, as well as blended or hybrid work from home plans. Organizations that did not develop work from home policies cited front line work or industries such as manufacturing that requires employees to be on site. As COVID restrictions have eased, 71% of respondents report changes to work from home policy and new policies describing return to onsite work.

When asked if work from home policies developed during the COVID-19 pandemic could be modified or shifted to be used as part of accommodations for persons with episodic disabilities, nearly two thirds of respondents say yes (63%), with 24% suggesting it would depend on the situation. 13% of respondents did not believe that work from home policies developed during COVID could be modified to support accommodations for episodic disability.

Discussion

Background

Human Resource Professionals from across Canada completed the online survey in September 2020. The survey was repeated, with new questions specific to COVID -19, from December 2021-February 2022. A small sample size (n=36, 2020) and (n=11, 2022) remains the limiting factor, despite efforts to share the survey widely among established networks. Significant false data was removed from each data set before analysis, and different frameworks to engage with HR professionals are being investigated. Comparison of the survey results reflect similar experiences over the last two years, and do not suggest much change in the landscape of Human Resources. The survey was administered and analyzed during the global COVID-19

pandemic. As in our previous survey, both the sample size and the discussion below must be understood within the context of this challenging environment.

Knowledge and Training

Within our sample, awareness of episodic disability and knowledge of resulting impacts on work remained quite high overall with most respondents describing previous or current knowledge. Similarly, a consistent proportion of respondents had no knowledge of the term, and this may suggest that there is a group of HR professionals who may benefit from accessible information on episodic disabilities. Acquiring knowledge through various sources, including formalized training remained the same, with about half of HR professionals learning about episodic disability from a training session. The remainder of respondents' knowledge was attributed to personal experience and information gathered in the workplace. While formal training isn't always a necessity when introducing information, without dedicated, professional focus to ensure consistent knowledge translation of current information, equitable provision of accommodations for people with episodic disabilities will not improve.

Workplace Accommodations

Income supports and return to work planning made up a large part of the workload for our survey respondents. Income support categories have remained the same over time and include sick leave, short term disability and long-term disability. As many of these are provided by private insurance, employees are often limited in the support they can access. In our survey, long term disability was described as the most common income support provided, which may reflect the sectors in our sample. Accommodations at work were most commonly part-time hours, or flexible work hours, and working from home. Interestingly, work from home was third most common (36%) after the first two accommodations. This contrasts with answers found in our COVID-19 specific questions, where work from home policy was reported for at least 75% of the respondents, and most staff requests were accommodated where the sector allowed.

The respondents in our 2022 survey described the cost benefit analysis for episodic disability accommodations as being either cost neutral or cost effective. However, when describing why accommodations requests were declined, prohibitive cost was listed among the reasons

approximately a third of the time. When asked if accommodations for employees with episodic disabilities resulted in return to work after a disabling episode most HR professionals (91%) responded yes, however there was less clarity in whether they believed COVID-19 work from home policies could be modified for episodic disability accommodations.

Recommendations & Conclusion

This 2022 report supports the following recommendations:

- ❖ Support the development of a common knowledge base about episodic disabilities among HR Professionals
- ❖ Provide knowledge-specific training opportunities to HR professionals on working with and accommodating employees living with episodic disabilities.
- ❖ Modify existing work from home policies developed during the COVID -19 pandemic, to support accommodations for employees with episodic disabilities
- ❖ Empower Human Resources professionals as system navigators, who can act as links between employees, and organizations and champions for accommodating people with episodic disabilities

The context of the COVID -19 pandemic, during which our current survey and the 2020 survey were undertaken has only served to expand the prevalence of episodic disability, including the inclusion of “long COVID”. The numbers of Canadians living with episodic disability are increasing, and the impact on the workplace should not be underestimated. It is essential that HR professionals and employees living with episodic disability have an evidence-based source of information to draw on when planning and implementing accommodations at work and for return to work. The changes in policy and practice undertaken to address the pandemic may serve as a basis to expand and solidify episodic disability accommodations.

Appendix 1: Survey Questions - EN

2021/2022 Human Resources Survey Questions

1. Are you affiliated with an HR Association?

- Yes
- No

IF yes, please indicate the name of your association

2. Please provide us with some demographic information:

- city
- province
- industry
- sector
- Type of Organization
- private
- government
- non-profit
- other

“Episodic disabilities are characterized by periods of good health interrupted by periods of illness or disability. These periods may vary in severity, length and predictability from one person to another.”

Episodic disabilities include anxiety, depression, diabetes, MS, long-COVID, Crohn’s Disease, HIV, migraines, epilepsy, asthma, and many more.

3. Had you heard of the term/concept Episodic Disability(ies) prior to completing this survey?

- Yes
- No
- Similar wording, but not this exact term

If yes, please identify where you have previously encountered the term.

- In-person training
- Online training
- From a colleague, or in my workplace
- At a conference
- Personal experience (self, loved one, friend)
- Media (including social media)
- Other (please specify)

4. How would you describe your current level of knowledge related to accommodating Episodic Disabilities in the workplace?
 - I have no knowledge of episodic disability
 - I have some knowledge of episodic disability
 - I am knowledgeable about episodic disability
 - I am skilled/ an expert in episodic disability

5. As an HR professional, your time is broken down according to various projects and tasks. Out of 100% of your time, how much is spent on any work involving disability (e.g., 25%). Of this time, please describe how much is spent on the following
 - Disability support applications
 - Episodic disability support applications
 - Back to work planning

6. Are you able to identify the Episodic Disability cases in your caseload?
 - Yes
 - No

7. If yes, how much of your work time do you spend on work related to Episodic Disabilities?
 - Percentage of time spent on Episodic Disability cases
 - Percentage of time spent on non-Episodic Disability cases
 - Percentage of time spent on other activities

8. What is your estimate of Episodic Disability cases you've supported and/or addressed in your organization within the previous 5 years?
 - Number of episodic disability cases
 - Percentage of all disability cases

9. To what extent does your current Return-to-Work Policy address the unpredictable nature of Episodic Disabilities?
 - Our return-to-work policy supports the employees return to work through collaboration with HR, the senior supervisor and the employee
 - Our return-to-work policy addresses episodic disability, but only on a case-to-case review,
 - Our return-to-work policy addresses only approved permanent disabilities (physical injury causing disability, cancer, etc.,)
 - We do not have a return-to-work policy in place for episodic disabilities at this time

10. Has there been a cost-benefit analysis completed by your organization regarding accommodating an employee with Episodic Disabilities, as opposed to other actions such as long-term disability or replacing the employee?
 - Yes

- No

If yes, what were the findings?

- Cost-effective
- Cost neutral
- Costly
- No findings yet

11. What kind of Income Support Programs have you recommended and/or provided when you have responded to cases that are related to Episodic Disabilities? (Check all that apply)

- Long term disability
- Short term disability
- Sick leave
- Other (please specify)

Please elaborate on how these programs have resulted in an employee's accommodated return to work or other outcomes.

12. What kind of workplace accommodations have you provided when responding to the cases that are episodic? (Check all that apply)

- Part time work
- Flexible hours
- Job sharing
- Work at home
- Job re-design
- Job re-assignment
- None
- Other (please specify)

13. Generally, have your workplace accommodation plans resulted in employees with Episodic Disabilities returning to work?

- Yes
- No
- To a certain extent. Please elaborate below.

14. Have you had to turn down requests for accommodation from people living with Episodic Disabilities?

- Yes
- No

If yes, what was the main reason for declining accommodation?

- Didn't provide sufficient evidence of disability
- No program or plan in place to support disability accommodations
- Unable to provide the requested accommodation within scope of the role

- Cost to provide accommodation was prohibitive

15. Please describe any training or professional development specifically on Episodic Disabilities that you have received.

16. To what extent was the training sufficiently useful to prepare you to understand employees with Episodic Disabilities?

- Not useful
- Somewhat useful
- Useful
- Very useful

17. Do you recommend independent human resources certification on Episodic Disabilities?

- Yes
- No

18. What medium or format would make a training/course most useful for you?

- Workshop at an annual conference
- Online course
- In-person training course
- Website information
- Other (please specify)

19. Since the start of the COVID-19 Pandemic in 2020, and during subsequent stay at home orders and lockdowns, did your human resources department develop work from home policies, included blended work from home/work in office opportunities?

- Yes
- No

If no, please describe (i.e., Role involves direct in-person contact-retail, healthcare, community organization)

If yes, what type of policies were put in place? (i.e., all staff encouraged to work from home, blended work from home/ office policies, other remote work options)

20. How many employees were working from home or doing some percentage of remote work during the 2020-21 COVID pandemic?

- All our employees worked from home
- Some of our employees worked from home (the choice was up to employee)
- Some of our employees worked from home (choice made by HR)
- Most of our employees were in office

If yes,

21. Has the work from home or blended work policy been changed or updated as restrictions have eased?

- Yes
- No

22. Can the existing COVID related work from home or blended work policy be used to support those living with episodic disabilities in your organization?

- Yes
- No

Appendix 2: Survey Questions - FR

1. Êtes-vous affilié à une association ressources humaines ?

- Oui
- Non

Si oui, veuillez indiquer le nom de votre association

2. Veuillez nous fournir des informations démographiques :

- ville
- Province
- industrie
- secteur
- Type d'organisation
- privé
- gouvernement
- non lucratif
- autre

« Les invalidités épisodiques se caractérisent par des périodes de bonne santé entrecoupées de périodes de maladie ou d'invalidité. Ces périodes peuvent varier en gravité, en durée et en prévisibilité d'une personne à l'autre.

Les invalidités épisodiques comprennent l'anxiété, la dépression, le diabète, la SEP, le long COVID, la maladie de Crohn, le VIH, les migraines, l'épilepsie, l'asthme et bien d'autres.

3. Avez-vous entendu parler du terme/concept invalidité(s) épisodique(s) avant de répondre à cette enquête ?

- Oui
- Non
- Des mots, Libellé similaire, mais pas ce terme exact

Si oui, veuillez indiquer où vous avez déjà rencontré le terme.

- Formation en personne
- La formation en ligne
- D'un collègue, ou sur mon lieu de travail
- Lors d'une conférence
- Expérience personnelle (soi, être cher, ami)
- Médias (y compris les médias sociaux)
- Si Autre (veuillez préciser)

4. Comment décririez-vous votre niveau actuel de connaissances en matière d'adaptation aux invalidités épisodiques en milieu de travail ?

- Je n'ai aucune connaissance de l'invalidité épisodique
- J'ai une certaine connaissance de l'invalidité épisodique
- Je connais l'invalidité épisodique
- Je suis compétent/un expert en invalidité épisodique

5. En tant que professionnel des ressources humaines, votre temps est réparti selon divers projets et tâches. Sur 100 % de votre temps, combien est consacré à tout travail impliquant un handicap (par exemple, 25 %). De ce temps, veuillez décrire combien est dépensé pour les éléments suivants

- Demandes d'aide aux personnes handicapées
- Demandes de soutien aux invalidités épisodiques
- Planification de retour au travail

6. Êtes-vous en mesure d'identifier les cas d'invalidité épisodique dans votre charge de travail ?

- Oui
- Non

7. Si oui, combien de temps consacrez-vous au travail lié aux invalidités épisodiques ?

- Pourcentage de temps consacré aux cas d'invalidité épisodique
- Pourcentage de temps consacré aux cas d'invalidité non épisodique
- Pourcentage de temps consacré à d'autres activités

8. Quelle est votre estimation des cas d'invalidité épisodique que vous avez pris en charge et/ou traités dans votre organisation au cours des 5 dernières années ?

- Nombre de cas d'invalidité épisodique
- Pourcentage de tous les cas d'invalidité

9. Dans quelle mesure votre politique actuelle de retour au travail aborde-t-elle la nature imprévisible des invalidités épisodiques ?

- Notre politique de retour au travail soutient le retour au travail des employés grâce à la collaboration avec les RH, le superviseur principal et l'employé
- Notre politique de retour au travail traite de l'invalidité épisodique, mais uniquement sur un examen au cas par cas,
- Notre politique de retour au travail ne concerne que les invalidités permanentes approuvées (blessures physiques causant une invalidité, cancer, etc.)
- Nous n'avons pas de politique de retour au travail en place pour les invalidités épisodiques pour le moment

10. Il y a-t-il eu une analyse coûts-avantages réalisée par votre organisation concernant l'adaptation d'un employé ayant des invalidités épisodiques, par opposition à d'autres actions telles qu'une invalidité de longue durée ou le remplacement de l'employé ?

- Oui
- Non

11. Quel genre de programmes de soutien du revenu avez-vous recommandé et/ou fourni lorsque vous avez répondu à des cas liés à des invalidités épisodiques? (Cochez toutes les cases)

- Invalidité de longue durée
- Incapacité de courte durée
- Congé de maladie
- Autre (veuillez préciser)

Veuillez expliquer comment ces programmes ont entraîné le retour au travail adapté d'un employé ou d'autres résultats.

12. Quels types d'aménagements en milieu de travail avez-vous fournis pour répondre aux cas épisodiques ? (Cochez toutes les cases)

- Travail à temps partiel
- Heures flexibles
- Partage d'emploi
- Travail à la maison
- Refonte du travail
- Réaffectation d'emploi
- Rien
- Autre (veuillez préciser)

13. En général, vos plans d'adaptation en milieu de travail ont-ils entraîné le retour au travail des employés souffrant d'invalidité épisodique?

- Oui
- Non
- Dans une certaine mesure. Veuillez préciser ci-dessous.

14. Avez-vous dû refuser des demandes d'hébergement de personnes vivant avec des invalidités épisodiques?

- Oui
- Non

Si oui, quelle était la principale raison du refus d'hébergement ?

- N'a pas fourni de preuves suffisantes d'invalidité
- Aucun programme ou plan en place pour soutenir les aménagements pour les personnes handicapées
- Incapable de fournir l'accommodement demandé dans le cadre du rôle
- Le coût de l'hébergement était prohibitif

15. Veuillez décrire toute formation ou tout développement professionnel spécifiquement sur les invalidités épisodiques que vous avez reçu.

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16. Dans quelle mesure la formation était-elle suffisamment utile pour vous préparer à comprendre les employés ayant des invalidités épisodiques ?

- Pas utile
- Assez utile
- Utile
- Très utile

17. Recommandez-vous une certification indépendante des ressources humaines sur les invalidités épisodiques ?

- Oui
- Non

18. Quel support ou format rendrait une formation/cours le plus utile pour vous ?

- Atelier lors d'une conférence annuelle
- Cours en ligne
- Cours de formation en personne
- Informations sur le site Web
- Autre (veuillez préciser)

19. Depuis le début de la pandémie de COVID-19 en 2020, et au cours des ordonnances de séjour à domicile et des blocages qui ont suivi, votre service des ressources humaines a-t-il élaboré des politiques de travail à domicile, y compris des opportunités de travail mixte à domicile/travail au bureau ?

- Oui
- Non

Si non, veuillez décrire (par exemple, le rôle implique un contact direct en personne, les soins de santé, l'organisation communautaire)

20. Combien d'employés travaillaient à domicile ou effectuaient un certain pourcentage de travail à distance pendant la pandémie de COVID 2020-21 ?

- Tous nos employés travaillaient à domicile
- Certains de nos employés travaillaient à domicile (le choix appartenait à l'employé)
- Certains de nos employés travaillaient à domicile (choix fait par les RH)
- La plupart de nos employés étaient en poste

Si oui,

21. Est-ce que la politique de travail à domicile ou de travail mixte a-t-elle été modifiée ou mise à jour à mesure que les restrictions se sont assouplies ?

- Oui
- Non

22. La politique actuelle de travail à domicile ou de travail mixte liée à la COVID peut-elle être utilisée pour soutenir les personnes vivant avec des invalidités épisodiques dans votre organisation ?

- Oui
- Non