The "Back to Work" plan: occupational reintegration for invalidity benefit recipients

A case of the National Institute for Health and Disability Insurance

National Institute for Health and Disability Insurance
Belgium
Summary

Over the past several years the National Sickness and Invalidity Insurance Institution (Institut national d’assurance maladie-invalidité (INAMI)) has been developing an active policy of occupational reintegration for persons receiving benefits under the invalidity insurance scheme. In co-ordination with public vocational training and reintegration organisations (public employment services) and mutual benefit society health schemes, this policy has resulted in the occupational reintegration of over 4,000 individuals into the labour market (through training) and more than 40,000 cases of partial work resumption. This "Back to Work Plan" is a program based principally on the International Social Security Association Guidelines on Returning to Work and Reintegration.

CRITERIA 1

What was the issue/problem/challenge addressed by your good practice?

Since the early 2000s, Belgium has faced a considerable increase in the number of persons benefitting from the health insurance scheme that covers both invalidity benefits (work incapacity longer than one year) and temporary incapacity benefits (work incapacity ranging from one to 12 months). This increase is due to the ageing of the working population, reforms in the unemployment insurance and pension sectors, a reduction in early retirement possibilities and the emergence of new mental and physical illnesses.

CRITERIA 2

What were the main objectives and the expected outcomes?

1. Develop collaboration between social security institutions and public employment services.

2. Increase the number of socially insured returning to the work market through vocational training or the partial resumption of a productive activity.

3. Develop a culture of prevention and occupational reintegration in the Belgian social security sector.

4. Develop the services offered to the socially insured, transforming them into a more integrated and comprehensive approach that includes individualized support for occupational reintegration rather than a simple payment of benefits.
CRITERIA 3

What is the innovative approach/strategy followed to achieve the objectives?

1. Development of a strategic plan based on international experiences and particularly by following the ISSA Guidelines, the National Institute of Disability Management and Research (NIDMAR) Standards and the International Disability Management Standards Council (IDMSC).

2. Development of a partnership-based approach bringing together public employment services, social security institutions and trade union organizations to put in place a single track system for insured persons based on a “one-stop shop” approach.

3. Development of the scientific understanding of work incapacity by creating a centre of expertise on work incapacity tasked with coordinating and disseminating studies on the subject.

4. Development of a certified training course in disability management in accordance with NIDMAR programs and Standards to ensure the uniform implementation of a high-quality program.

CRITERIA 4

Have the resources and inputs been used in an optimal way to achieve the set objectives and the expected outcomes? Please specify what internal or external evaluations of the practice have taken place and what impact/results have been identified/achieved so far.

1. This program has never gone over budget. At each stage in the program, great care was taken to reconcile results, quality and good governance with the budget.

2. The program is run in the three main regions of the country (Flanders, Wallonia and Brussels). Each of these three regions has a steering committee with actors from inside and outside the program. The committees are responsible for the internal assessment of the program.

3. An external assessment is planned for 2016. During the following triennium this external evaluation will serve as the basis for development of not only quantitative but also qualitative indicators.

4. As of 31 December 2015, the program had resulted in the occupational reintegration of over 4,000 individuals into the labour market and more than 40,000 cases of partial resumption of work. In comparison with 2013, this represents an increase of 400 per cent.
in reintegration of individuals and 25 per cent in partial resumptions. These results were obtained through the introduction of a culture of case management and a standardized approach.

CRITERIA 5

What lessons have been learned? To what extent would your good practice be appropriate for replication by other social security institutions?

1. A voluntary approach to returning to work enables a calm and constructive collaboration between the social security institution and its users.

2. A partnership-based approach enables optimization of existing resources and synergy between the competencies of the various actors: social insurance medical officers, job coaches, occupational medical officers and social workers.

3. Case management coupled with a quality assurance approach makes it possible to handle more cases under better conditions.

4. Good practice, and the experiences of the occupational risk sector, demonstrate that an approach based on disability management, can, with some modifications, be applied to the invalidity and handicap benefits sector.