



ICOH 2022

33rd International Congress
on Occupational Health

Piloting a return-to-work intervention for people with burnout: a qualitative feasibility study

Lambreghts C, Vandenbroeck S, Godderis L



Charlotte Lambreghts



lotje.lambreghts@kuleuven.be



Centre for Environment and Health, KU Leuven, Belgium
IDEWE, External Service for Prevention and Protection at Work,
Belgium



STATEMENT SLIDE

I disclose the following conflicts of interest:

Research funded by:

National Institute for Health and Disability Insurance (NIHDI, Belgium)

Piloting a return-to-work intervention for people with burnout: a qualitative feasibility study

Background

We developed a return-to-work (RTW) intervention for burned-out (BO) people on sick leave:



multidisciplinary care pathway



initiated by the general practitioner (GP)



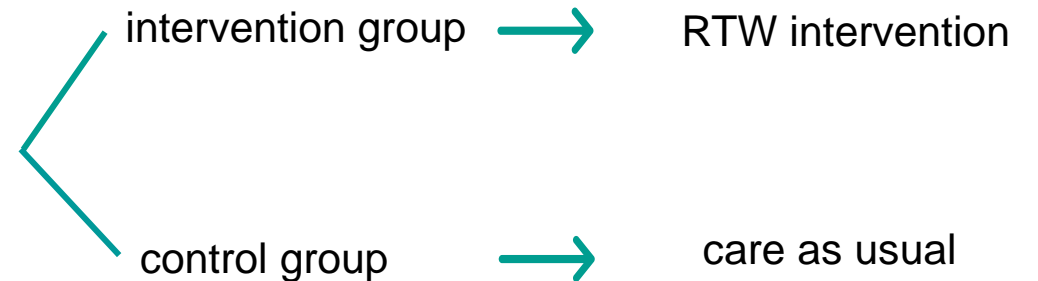
quick referral to a psychologist



communication with other stakeholders
(e.g. the workplace)

Goal

To evaluate the RTW intervention in a cluster-randomized trial (CRT):



Question

What are key feasibility issues in order to prepare the CRT?

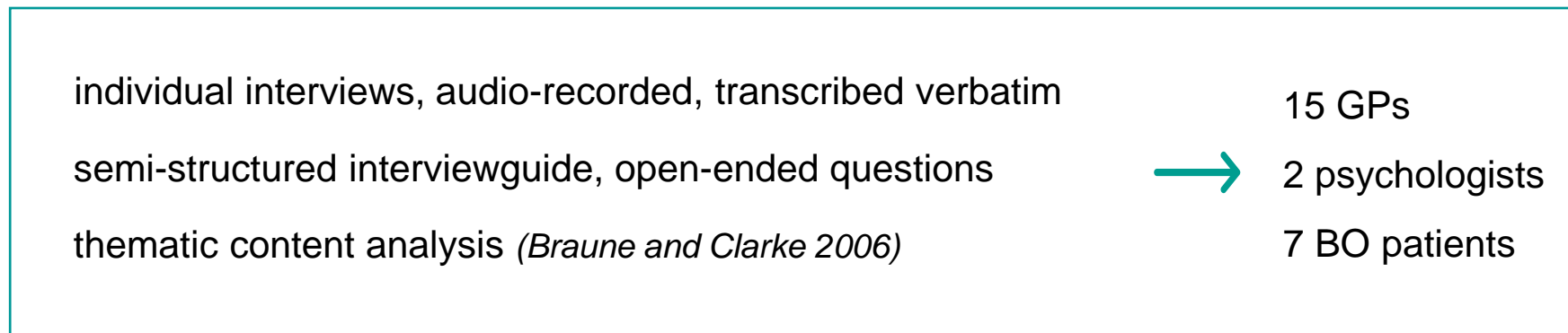
Piloting a return-to-work intervention for people with burnout: a qualitative feasibility study

Methods

Step 1: pilot study



Step 2: interview study



Piloting a return-to-work intervention for people with burnout: a qualitative feasibility study

Results

GPs did not include all eligible patients in the pilot study:

- lack of time due to high workload related to COVID-19
- refusal by patients to participate in the study (e.g. not willing to fill in study documents)

GPs and psychologists communicate very little with occupational physicians (despite the study protocol)

Patients believe a multidisciplinary care pathway can support and facilitate their return to work

Patients believe communication with the workplace is hard but essential to return to work

GPs and psychologists think it is valuable to collaborate in the diagnosis and follow-up of people with burn-out

GPs and psychologists think filling in the study documents is feasible within the proposed time frame of the study

Conclusions

There are several challenges in preparing the full-size CRT: barriers for inclusion of patients need to be tackled and the study protocol needs to support communication between stakeholders more. Study documents and the general concept of the care pathway are well received.