

Market leading return to work support

We place the employee at the heart of our approach - it's the foundation of our rehabilitation philosophy. Providing tailored, individual care - that's what's really important.

After a spell of poor health, struggling to return to work without support can be counterproductive. That's why our Group Income Protection rehabilitation Team are focused on providing intervention at the earliest possible opportunity.

Early intervention enables our team of trained in-house clinicians to talk to the employee and find out the root cause of their absence.

This vital assessment means that from the very outset, the most appropriate treatment and support for the employee is put into place.

All our intervention and treatment can happen without a GP-referral, and we fund any treatment, with no additional cost to the employer and/or employee.

We develop a return-to-work plan in partnership with the employee and employer. That mediation role, backed up with clinical expertise, aims to support a successful return to work

How our Group Income Protection helped employees return to work in 2019



We returned **26%** of the industry total (**3,415**) as reported by GRiD



That's 882 employees returned to work within the deferred period



324 Further employees were able to return to work, following a period of benefit and with the help of our active intervention



2,916 Psychological and physiotherapy treatments were also arranged and paid for by us



82.7% of employees with Group Income Protection mental health claims returned to work before the deferred period

Our 'Market leading support' statement is substantiated by returning 26% of employees back to work within the deferred period – whilst holding a 12% share of the UK Group Income Protection market in the same time period.

Case Study: Anxiety and Depression

Graham's story

An urgent referral

Graham, who worked as a Finance Manager, had been unable to work for 10 weeks when we received notification of his absence. An Occupational Health report recommended that he receive Cognitive Behavioural Therapy (CBT). We assessed the recommendation and agreed to immediately refer him to our psychological provider CBT Clinics for an initial assessment.

Tailoring a treatment pathway for depression

The initial assessment report from our mental health experts confirmed Graham was suffering with insomnia, stress and suicidal ideation. He was feeling pressured to return to work, yet was unable to make decisions, reported sleep deprivation and was feeling increasingly depressed. To begin his individual care pathway, Graham agreed to undertake the recommended ten CBT sessions with CBT Clinics.

Following five sessions, the rehabilitation team reported that Graham was fully engaged, and motivated to return to work. Together with Graham and his employer, our team had arranged a phased return to his role. He had no return to work barriers and was feeling more confident and in control of his feelings and stress.

A positive return to work

We received a discharge report from CBT Clinics, confirming Graham had completed 10 sessions. He was back at work full-time within the deferred period, taking on more responsibilities and reporting this to be going well. An additional two treatment sessions were requested by CBT Clinics, this was clinically supported and agreed by one of our in-house Rehabilitation Specialists. The final rehabilitation call identified that Graham's improvement was being maintained, and he was using the skills he'd learnt to better manage his job and day to day life.

This case study is based on an actual event but has been amended to protect the identity of the individual.



"To support Graham's recovery, I attended a meeting with him and his line manager and collaboratively we agreed a phased return to work plan. I made sure that close contact was kept with Graham to offer vital support. It was a pleasure to see him return to full hours and duties"

Jonathan Moffitt,
Rehabilitation Specialist

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