**Working with Chronic Pain: Assessment of impacts (WORC-PAIN)**

**Guide for use:** WORC-PAIN has been designed to be used at a population-level to assess impacts of working with chronic pain. It is for people who are currently in work, including those on sick leave but who have been at work within the preceding month. It is therefore advised to include an initial filtering question to identify those who have been at work in the last month, to invite to subsequently complete WORC-PAIN.

WORC-PAIN has been developed with significant input from people working with chronic pain and other stakeholders. It consists of three subscales and three descriptive questions. The three subscales provide quantifiable assessments of:

- wider impacts of working with chronic pain;
- day-to-day impacts of working with chronic pain; and
- individual- and job-based facilitators to support working with chronic pain

Three descriptive questions about experiences of disclosing pain to others at work and past changes to work provide essential contextual information for understanding the current impacts assessed by the instrument. These descriptive items also provide important population-level information about longer-term impacts and about potential targets for interventions based on disclosure status.

However, the instrument can also be used at an individual-level to facilitate constructive individual conversations about work in a clinical context. In which case, other areas which people working with chronic pain felt were important to explore included: additional detail about disclosure and communication at work, physical job modifications, compensating for pain, relationships at work, impacts of medications, accidents, and further expectations about changes to their work in the future (see WORC-PAIN supplemental items).

**Descriptive items:**

Items 1, 2, and 10 are to be used descriptively (e.g. for reporting the proportion of participants responding affirmatively) to provide contextual information on whether pain has been disclosed at work and on the experience of occupational changes in the past due to chronic pain.

**Subscales:**

To generate subscale scores, individuals should have completed at least 7 of the 10 items comprising Subscales 1 and 2, and at least 3 of the 4 items comprising Subscale 3. For any missing items, the average of other items in the respective subscale should be substituted for the missing item(s).

- Subscale 1: wider impacts of working with chronic pain
    - Sum items: 7 (a-e); 8 (d,e); 9; 11 (a,b)

- Subscale 2: day-to-day impacts of working with chronic pain
    - Sum items: 3 (a,b); 5 (a-e); 6 (a,b); 8b

- Subscale 3: individual- and job-based facilitators to support working with chronic pain
    - Sum items: 4 (a,b); 8 (a, c) [*note: responses to 8a and 8c should be reverse coded*]



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**Participant instructions:**

The following questions ask about **chronic pain in relation to work.** However, we appreciate that chronic pain is often associated with other symptoms such as fatigue, difficulty concentrating and changes in mood. In addition, chronic pain is often a feature of specific conditions, for example rheumatoid arthritis. **We use the word 'pain' in the following questions to refer to your pain and to these other related symptoms or conditions.**

We also appreciate that work is different for everyone. If a question is not appropriate for you (for example the question asks about a line manager and you don't have a line manager), please use the 'Not applicable' (N/A) tick box.

| Item | Responses |
|---|---|
| 1. Have you told anyone at work about your pain? | No; Yes |
| 2. Who knows about your pain at work?<br>a) Employer (e.g. human resources, directors, etc.)<br>b) Line manager/supervisor<br>c) Occupational health<br>d) Colleague(s) | Yes; No; N/A |
| 3. Please tell us about your pain and your journey to work.<br>a) My pain changes the method I use to get to work (e.g. car, cycle, bus etc.).<br>b) My pain interferes with my travel to and from work. | Regularly (6);<br>Sometimes (3);<br>Never (0); N/A (0) |
| 4. Please indicate your agreement with the following statements.<br>a) I feel I have adequate schedule-based job modifications in place for my pain at work (e.g. flexible hours, time off for medical appointments, working from home).<br>b) My employer/line manager supports me in putting modifications in place for my pain at work. | Strongly agree (0);<br>Agree (2);<br>Disagree (4);<br>Strongly disagree (6);<br>N/A (0) |
| 5. How often does each of the following occur at work because of your pain?<br>a) I cannot concentrate<br>b) I am irritable<br>c) I make mistakes<br>d) I worry that I am making mistakes<br>e) My work takes me longer to do | Never (0);<br>Rarely (1.5);<br>Sometimes (3);<br>Often (4.5);<br>Always (6) |
| 6. For the following question, think about the last two weeks at work. If you haven't been at work in the last two weeks, think back to when you were last in work.<br>In the **last two weeks** at work, how common were each of the following?<br>**I had a <u>bad day</u> with <u>more pain</u> and**<br>a) My work was seriously affected<br>b) My work was slightly affected | Never (0);<br>Rarely (1.5);<br>Sometimes (3);<br>Often (4.5);<br>Always (6) |



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| | |
|---|---|
| 7. For the following question, think about the last two weeks at work. If you haven't been at work in the last two weeks, think back to when you were last in work.<br>Within the **last two weeks** of work, how often has working with pain prevented you from doing things outside of work? (Please include any time you may have spent recovering from work or preparing for work) | Not at all (0);<br>Some of the time (2);<br>Most of the time (4);<br>All of the time (6) |
| a) Working with pain stopped me from looking after myself<br>b) Working with pain stopped me from doing housework<br>c) Working with pain stopped me from spending time with my family<br>d) Working with pain stopped me from seeing friends<br>e) Working with pain stopped me from doing leisure activities | |
| 8. When thinking about your pain at work, how often do you feel the following statements are true? | Never (0);<br>Rarely (1.5);<br>Sometimes (3);<br>Often (4.5);<br>Always (6) |
| a) Work has meaning for me and helps me get through the day (*reverse*)<br>b) I feel I let down people I work with<br>c) My work takes my mind off my pain (*reverse*)<br>d) I fear losing my job because of my pain<br>e) If I left my job, I wouldn't find another | |
| 9. Please indicate your agreement with the following statement | Strongly agree (6);<br>Agree (4.5);<br>Neither agree nor disagree (3);<br>Disagree (1.5);<br>Strongly disagree (0) |
| My pain has affected my career, which has had a negative impact on my finances | |
| 10. Because of your pain, have you ever: | Yes; No; N/A |
| a) Moved to job that pays less<br>b) Reduced your hours<br>c) Lost promotion opportunities<br>d) Stopped doing overtime/extra hours<br>e) Stopped working completely<br>f) Changed jobs<br>g) Become self-employed | |
| 11. Please indicate your agreement with the following statements | Strongly disagree (0);<br>Disagree (1.5);<br>Neutral (3);<br>Agree (4.5);<br>Strongly agree (6) |
| Because of your pain do you think you will in the future:<br>a) Stop work completely<br>b) Reduce your hours | |



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