



Still Missing the Boat When Dealing with Work-Related Injuries?



Can we all agree that there are numerous studies to indicate that the longer someone is out of work, the more difficult it is to facilitate a return to work for them? If we all know this, then why do we continue to take the same old route of keeping a worker out of work without any objective evidence of their physical abilities and the physical demands of their job? Why are we waiting for almost 1 year post injury and out of work, before referring someone for work conditioning or an FCE?

An analysis of Job Ready's referrals over the past year show that our FCE referrals are out of work for 1.1 years before being referred for an FCE. Our work conditioning patients are just below that amount of time – approximately 351 days out of work before being referred!

Studies are showing that when someone is out of work for only 6 weeks, their chances of returning to work are only 50%!!

Employers who do post offer testing are quickly finding out the benefits of doing a Fit for Duty test as soon as the injured worker is medically stable. Not only do they often have evidence of what was pre-existing before the person was placed on the job, but they find out early on, whether someone is capable of returning to work safely, instead of relying on the physician to make the call.

If the person is not safe to return to work, the FFD test provides clear information about what deficits exist (if any) and what treatment needs to be provided to eliminate those deficits. Repeating the FFD test at periodic intervals should show progress in rehabilitation and if no progress is seen, then measures to improve can be implemented. Also, sincerity of effort testing may indicate non-compliance and can be addressed quickly and early, to prevent unnecessary lengths of time out of work.

Work conditioning is an underused and misunderstood return to work tool, but it provides the best outcomes for injured workers. Once the FFD test determines work-related deficits, work conditioning can help the injured worker reduce and/or eliminate those deficits. Other benefits include:

- Daily assistance in increasing endurance, strength and flexibility
- Increase in confidence in performing daily job tasks
- Instruction/education in prevention of re-injury and self-treatment of flare-ups and pain
- Opportunities to practice job specific tasks, using tools and equipment used at work
- Sincerity of effort testing to determine patient's effort levels and document non-compliance
- Instruction in proper body mechanics
- Decrease in fear of increasing activity by offering a "safe" place to practice work abilities
- A bridge for the gap between Physical Therapy and return to work

Work conditioning is also a valuable tool to use following an invalid FCE. Basing permanent restrictions on an invalid FCE is not only a disservice to the employer, but it is a huge disservice to the injured worker. An invalid FCE only tells us the LEAST that worker can do. Further, it does not tell us WHY the FCE was invalid. Work conditioning allows that worker to have the opportunity to increase/improve their abilities or, if they choose to be non-compliant, then at least the program will provide documentation to that effect. The benefit of the doubt must be given to the injured worker, until they show that they are not willing to put forth the effort.

Probably the statement we most hear from our work conditioning patients is: "I wish I had come here sooner, because I would have been back to work much sooner!" Injured workers are often referred back to physical therapy when they are not ready to return to work. Unfortunately, physical therapy is not designed to facilitate a safe, functional return to work. Consequently, when they are finally referred to work conditioning, they are often incorrectly referred for 2-3 times per week. Work conditioning should be a DAILY program – not more physical therapy, but job specific activities in a WORK environment.

An FCE can often be avoided altogether if an injured worker is referred to work conditioning early in the rehab process. Regular, periodic evaluations during the work conditioning program will identify and document progress or lack of effort, to reduce the amount of visits and allow either an earlier return to work, or discharge due to lack of effort.

Assistance in facilitating an early and safe return to work for injured workers is available by utilizing fit for duty testing and work conditioning early in the process. Physicians, healthcare providers, rehab case managers, occupational health nurses, employers and worker's comp adjusters (and PT provider networks) - any one of these can make that referral, as long as the injured worker is medically stable to participate. Don't miss the boat by reducing your worker's comp headaches and costs.

For more information about functional testing, job analysis, work conditioning or assistance in reducing worker's comp costs, contact Job Ready.

Upcoming Events



August 21: Worker's Comp Focus Group Meeting (WorkSTEPS Employers only)

9:30am-11:30am - contact Michelle Morgan for more information:
michelle.morgan@jobreadyservices.net

September 8-10: Debra Lord will be a featured speaker at the **2014 Annual Hospice and Palliative Care Conference** in Charleston, SC.

September 9: Debra Lord will be a featured speaker at the **NC PRIMA** conference in Wilmington.

September 18: Debra Lord will be a featured speaker at the **SHRM** Conference in Greenville, NC.

November 13: Save this date! Job Ready and Jones Insurance will be hosting a Worker's Comp Seminar in Raleigh.