

Pathways Injury Management

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Pathways Injury Management

A system which is orientated to identifying potentially long term claimants as early as possible and provides an injury management process which facilitates optimum injury outcomes with these claimants, thereby reducing the personal, organisational and financial losses resulting from these claims

Claims experience

	To	\$1000-	\$5000-	\$10000-	\$50000
	\$1000	\$5000	\$10000	\$50000	or more
% of claims	84.5	10.7	1.9	2.4	0.5
% of payout	9.6	14.7	9.7	21.9	44.2

Case characteristics of (potentially) long term claims

A relatively few claimants will contribute disproportionately to the claims experience of a Department/organisation

HIGH LOSS CLAIMS

- High severity injuries
- Less severe injuries complicated by psychosocial factors

Case characteristics of (potentially) long term claims

Experienced disability claims handlers report that more than three-quarters of their most problematic cases started out as seemingly minor problems

Case characteristics of (potentially) long term claims

- **The diagnoses made by the treating practitioners, in these (potentially) long term claims, will be frequently different to the diagnoses made through more comprehensive assessments of the claimants**

Case	Diagnosis by treating practitioner	Diagnosis through assessment process
1	Bilateral frozen shoulders and osteoarthritis	Bilateral rotator cuff disorder with severe osteoarthritis of right shoulder
2	Chronic overuse syndrome with development of chronic regional pain syndrome	Adjustment Disorder (with associated tightness in neck-shoulder musculature)
3	Mechanical low back pain	Sacroiliac joint dysfunction with Adjustment Disorder (associated with tightness in spinal musculature)
4	L5-S1 disc injury	Minor spinal muscular strain (settled) complicated by Adjustment Disorder (with associated tightness in spinal musculature)
5	Previous bilateral carpal tunnel syndrome with decompressions, ulnar nerve compression at right elbow (with transposition of nerve), medial epicondylitis of left elbow, bilateral rotator cuff disorder with decompressive surgery on right shoulder, CRPS Type 1	Adjustment Disorder (with associated tightness in spinal musculature)
6	Chronic soft tissue strain to cervical, thoracic and lumbar spine, probable overuse injury right arm	Adjustment Disorder with associated tightness in spinal musculature worsened by postural and emotional demands of job

Injury Management Programs

- **Injury Management Programs based on the diagnoses of treating practitioners will be largely ineffective**

Types of long term cases

1. Psychosocial disturbance → Physical symptoms (33%)
2. Psychosocial disturbance → Psychological/psychiatric and physical symptoms
→
3. Physical disorder (4%)
4. Physical disorder complicated by psychological/psychiatric disturbance due to physical disorder (13%)
5. Physical disorder complicated by disturbance in psychosocial functioning unrelated to physical disorder (21%)
6. Physical disorder complicated by psychological/psychiatric disturbance due to physical disorder and psychosocial disturbance unrelated to physical disorder (29%)

Which is the correct Pathway



Case characteristics of (potentially) long term claims

- In a considerable proportion of the long term cases, it appears that personality functioning contributes to the development and/or perpetuation of symptoms to a considerable or marked extent

Personality functioning

- Obsessional, rigid traits
- Narcissistic traits
- Immature
- Propensity to somatise

Personality traits

Lack of insight into personality &
emotional functioning

Case characteristics of (potentially) long term claims

Simplistic measures do not resolve complex problems

Case characteristics of (potentially) long term claims

If the claimant is “taken down” the wrong Injury Management Pathway, the prognosis will be worsened

Which is the correct Pathway



Injury Management Programs

- Need to identify potentially long term claimants as early as possible
- Need to properly assess the psychosocial functioning of claimant and the impact, if any, of any disturbance in psychosocial functioning on symptom reporting
- Define the appropriate Injury Management Pathway
- Monitor the progress of the claimant down the “pathway” to resolution of the case

IDENTIFICATION OF POTENTIALLY LONG TERM CLAIMS

Poor Prognostic Indicators™ Workplace

**There are six Workplace Indicators.
Examples include:**

- **W2** (Perceived) conflict
- **W5** Injury type/severity does not appear to be consistent with mechanism of injury

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Poor Prognostic Indicators™

Case manager

There are ten Case Manager Indicators.

Examples include:

- **CM3** Lack of diagnosis, non-specific diagnosis or particular diagnosis (RSI, overuse syndrome, chronic fatigue syndrome, fibromyalgia)
- **CM6** Past history of frequent compensation claims or prolonged compensation claim

Poor Prognostic Indicators™

Clinical

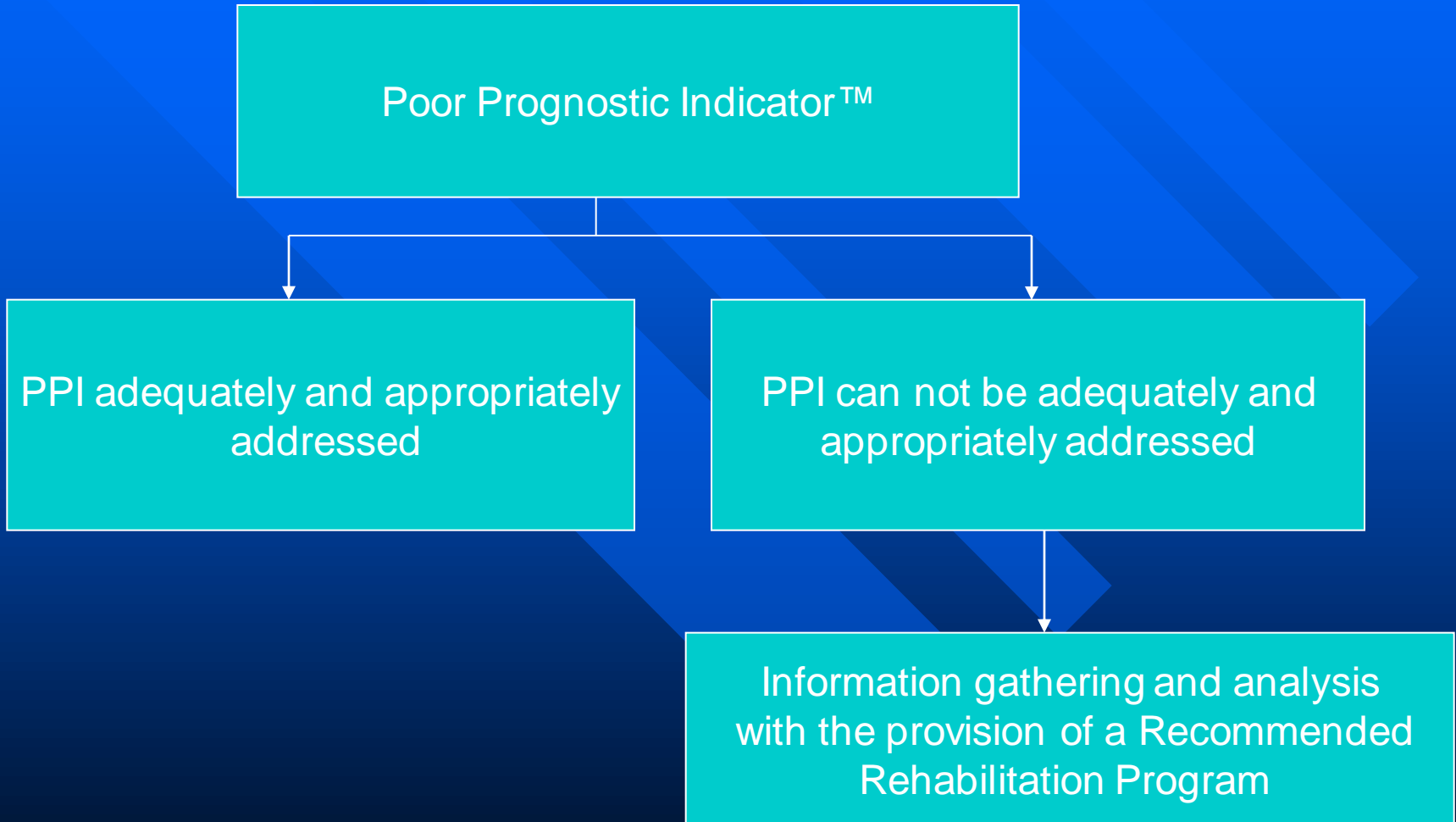
There are thirteen Clinical Indicators.

Examples include:

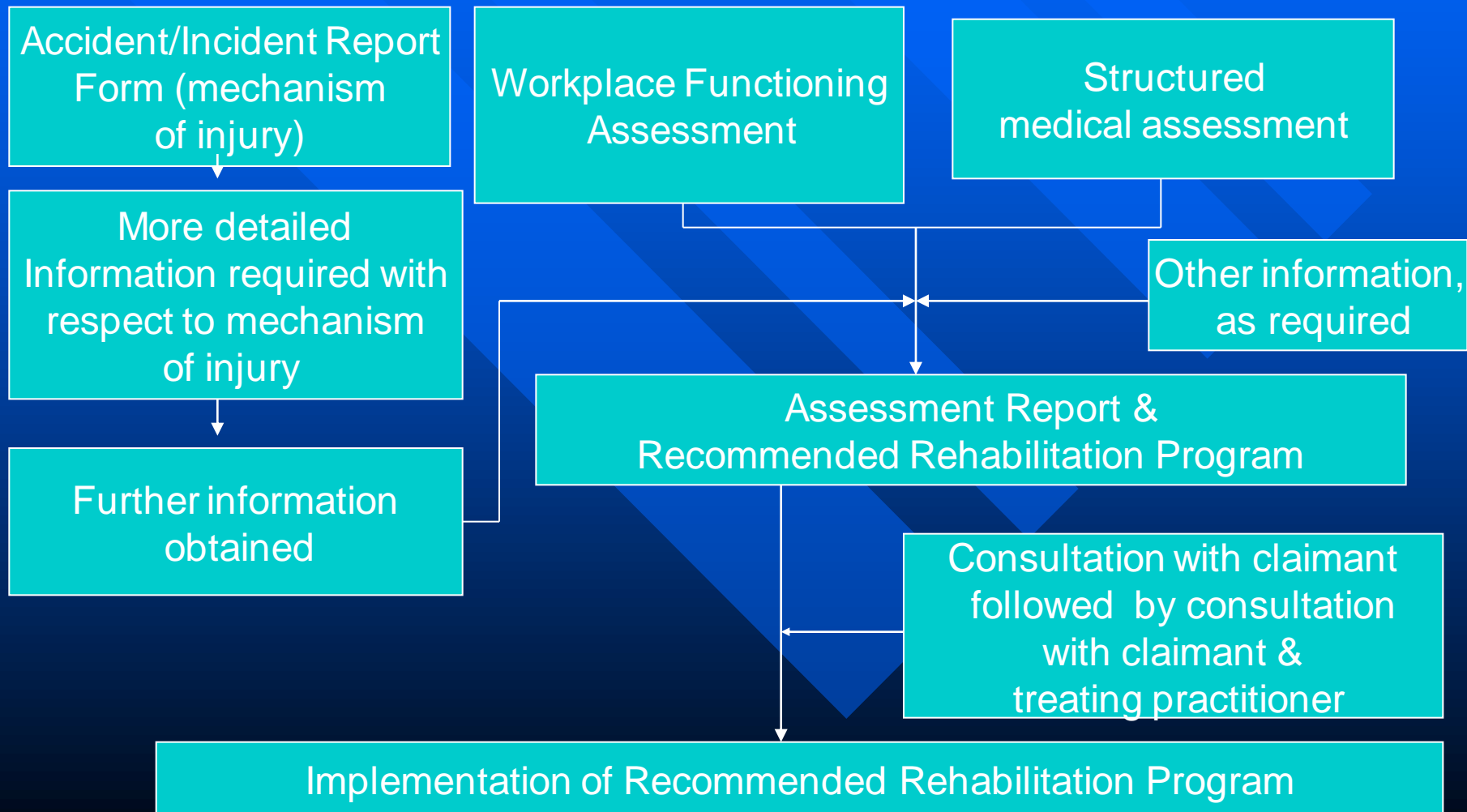
- **C2** Incongruity between diagnosis v. reported symptoms +/- clinical findings +/- findings on investigation
- **C13** Presence of other condition which can be related to the person's psychosocial functioning

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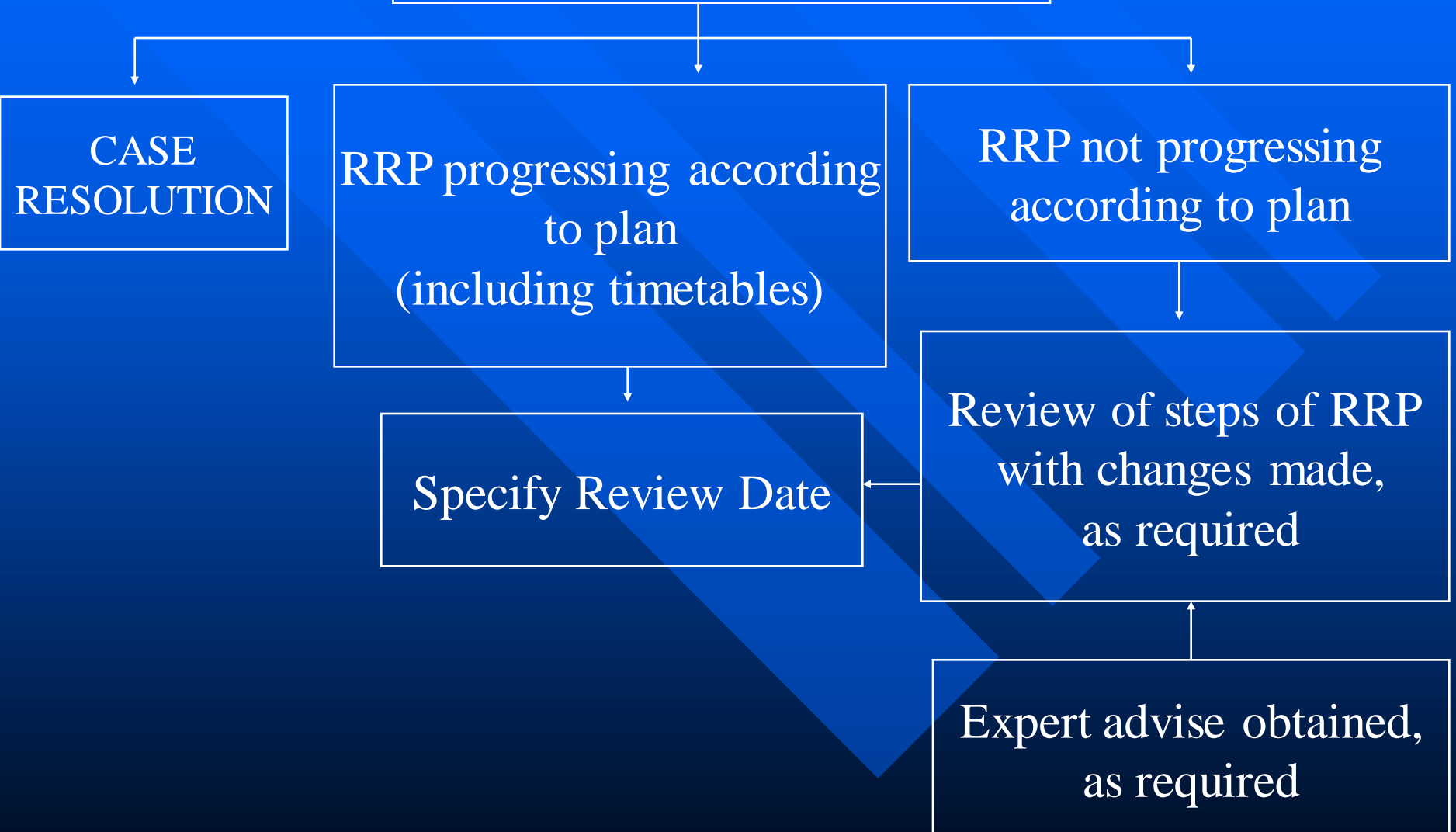
Pathways Injury Management™



ASSESSMENT – FRONT END CLAIMS



Review of RRP



CLAIMANT'S RESPONSE TO CHANGED DIAGNOSIS

Do not agree
with diagnosis/
Do not want to
follow RRP



Will continue
with physical
therapy & not
address psychosocial
functioning



Poor injury
outcome

Agree to at least some
extent with diagnosis/
Prepared to follow
RRP to at least some
extent



Varying outcomes
depending on
effectiveness
of interventions

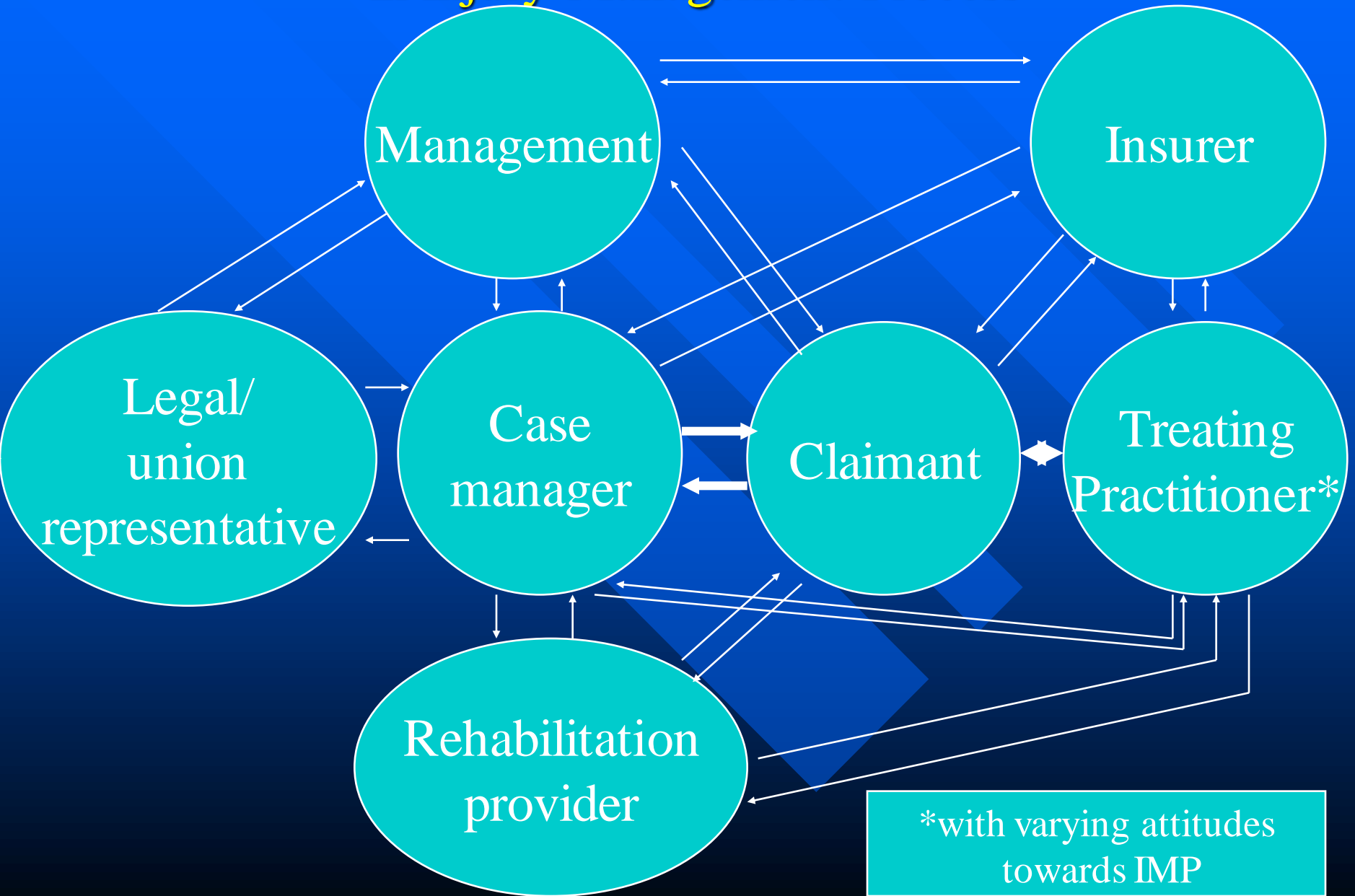
Agree with
diagnosis & will
follow RRP



Excellent
outcome

Managing the Injury Management Process

Complex Interrelationships between parties involved in Injury Management Process



Interrelationships between parties involved in Injury Management Process

The various parties have varying amounts of power in their inter-relationships within the Injury Management Process

Power within the Injury Management Process

- The clinical course will be determined by the treating practitioner(s) **in conjunction with the claimant**
- The claimant will, in essence, be the determinant of what the treating practitioner certifies with respect to the return to work process
- Management is/should be the main determinant of what occurs within the workplace

INJURY MANAGEMENT PROCESS

With such complex interrelationships between the parties and the potential for conflict, case managers should just

FOLLOW THE PROCESS

NO OPINIONS

NO JUDGEMENTS

Benefits of Pathways Injury Management

- Markedly improved injury outcomes
- More effective and focused rehabilitation
- More fair and equitable outcomes in common law cases due to the quality of information gathering through assessments and subsequent interventions
- Less emotional turmoil for case/claims managers and rehabilitation providers with involvement in (potentially) long term claims
- Improved workplace culture

Workshop – “Implementing Pathways Injury Management”

- For Human Resource Managers and anyone interested in obtaining better outcomes
- Half day on Thursday 14th October 2010
- Sydney CBD location
- For more information visit the Actevate web site www.actevate.com.au or ring Anna Mangold on 1300 669 552