

•KINNECT | TRAINING

5 Ways to Ensure Great Return to Work Outcomes



Rehabilitation at Work isn't Working?

There are many different influencing factors in the success in rehabilitation at work programmes. The severity of injury, treatment available and the input from the range of stakeholders affects the ability for someone to return to work. Many of these are difficult to influence.

As a Rehabilitation and Return to Work Coordinator it is important to have the right skills and knowledge of processes to get results.

Without the right skills and the support from the workplace there is difficulty influencing systems and stakeholders for good rehabilitation at work outcomes.

Poor system management in rehabilitation at work results in:

- Injured workers not complying
- Management not contributing effectively to rehabilitation at work
- Poor outcomes resulting in increased insurance costs
- Poor injured worker recovery

There is a solution

However, what we do know is that there are processes and systems that can help get a person back to work, reduce premium costs and get better outcomes for the injured worker and the workplace. Understanding and applying these processes will make your rehabilitation at work much more successful.

Rehabilitation at work can be complex but here are a few simple things to consider in complex cases to ensure better outcomes.



5 Tips To Ensure Great Return To Work Outcomes



1. Use a Job Dictionary / Task Analysis

Engage an Occupational Therapist to compile detailed Job Dictionaries to also assist in finding suitable duties for injured workers. These also can be used to recruit the right type of workers for the job role and cover yourself from workers who do not disclose their pre-existing injuries or medical conditions.



2. Work Hardening or Physical Conditioning Programs

These can be used as a tool to get the injured worker out of the house. Consider asking the insurer to approve a physical conditioning program managed by a qualified Exercise Physiologist (EP) to re-build strength and increase work tolerances. Medical approvals will be taken care of by the EP in a language the treating doctor understands. Consider if:

- It is difficult to find enough suitable duties for an injured worker;
- your injured worker reports disproportionate pain and is resisting return to work;
- your worker cannot attend the workplace for a return to work program, especially psychological or back injuries.



3. Functional Capacity Evaluation (FCE) at the worksite

Written by a qualified clinician, these can be used for:

- motivating and educating fearful injured workers how to safely manage their injury and work tasks so they do not re-injure.
- injured workers who are very pain focused or negative. A baseline assessment plus subsequent FCE's can prove progress throughout recovery.
- evidence a worker has capacity to work and function which is beneficial at Common Law if the injured worker sues for damages, as it may reduce the amount of compensation paid out for future economic loss.



4. Engage a qualified external Case Manager

For those serious, complex or tricky injury claims as it may be the most cost-efficient and time-efficient option. Engage an external case manager if you struggle with:

- losing control of injury claims & their costs;
- have limited understanding of your rights as an employer under Worker's Compensation laws;
- disconnect with injured workers & their medical progress;
- communication problems with insurance agencies, or claim dragging on;
- complicated insurance decisions or jargon which is difficult to understand;
- lack of time & knowledge to fuss with suitable duties programs;
- the paperwork downtime of injury management.



5. Case Conferences

These are invaluable when you are trying to manage a non-compliant injured workers or a treating Doctor who continues to certify the worker as totally incapacitated for work. The goal of a case conference is to obtain a medical certificate for return to work and approval of a Suitable Duties Plan (SDP).

- **Step 1** - engage an Occupational & Environmental Physician (OEP) to review the file, workplace and worker and report on their findings regarding the worker's capacity for return to work.
- **Step 2** – have an Occupational Therapist (OT) draw up a SDP in consultation with the Supervisor, OEP and worker.
- **Step 3** - book an extended appointment to see the treating doctor. Invite the injured worker and OT to attend. The trick is to discuss the evidence, from the OEP and OT, that the worker has capacity to return to work on a suitable duties plan.

Develop your skills as a Rehabilitation and Return to Work Coordinator

Becoming skilled in the rehabilitation at work principles can make a huge difference in your return to work outcomes. Injured workers will return sooner with better capacity, the costs will be lower, and stakeholders work much more effectively together.

Make sure you make the biggest impact you can by developing the right skills for successful rehabilitation at work programmes. KINNECT Training offers a Rehabilitation and Return to Work Coordinator Course to ensure you have the right skills and knowledge to get the best outcomes for workers.

BOOK NOW



or

1300 591 548