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Your work injury management newsletter **OCTOBER 2011**

***PHYSICIANS, CASE MANAGER AND THERAPIST WORK TOGETHER IN JOB FUNCTION MATCHING® FOR RETURN TO WORK***

By Barb Machtan MS, CRC, CCM,  
and Nancy Bellendorf, OTR

A forward-thinking orthopedic medical group uses DSI Job Function Matching® for return to work. Excellent medical care blends with the job matching used by therapists and employers. This article shares how **all parties work together as a team to help place workers back on the job.**

The relationship between Bone & Joint and Work Safe Therapy & Ergonomics started with a request for the therapist to go onsite to analyze the work demands for one patient. Secondly, a local employer invested in post-offer and return to work functional testing. The orthopedic group was included in the employer's programs from the beginning. Assistance with the assignment of transitional duty recommendations was at the top of the orthopedist's list. **One physician asked if he could "Just write out a 'standing order' for job function testing and matching", as he felt the objective information would be very valuable for him**

A team approach between the employer, the medical provider, the WC insurance claim handler, and the therapist is used. The Bone & Joint Center is committed to using Functional Capacity Assessments prior to assigning any permanent work limitations. In addition, their Certified Case Manager identifies the use Job Function Matching® early in the transitional duty process when assigning temporary work recommendations.

Rather than focusing on functional testing at the end of care, the physicians now have greater opportunities for successful safe return to work early while the worker is still acute and on temporary work restrictions. The physicians also appreciate the assist with complex or difficult return to work. The physician maintains control of the medical return to work process, but is given more reliable information on which to base decisions.

Job Function Matching® (JFM) requires measurement of a job's physical requirements for a Job Function Description. A Job Function Test is then designed to assess the worker's ability to perform the specific tasks of the job. This provides good communication to the physician and the employer on tasks the worker can or cannot do-**transposing a "diagnosis" (medical language) into "function" or work (employer language)**. In addition, ergonomic opportunities can be suggested. **The result is a safe and successful return to work**

**Benefits for the Medical Provider/physician**

- Objective physician's return to work recommendations and patient safety.
- Assures that patients will not exceed their functional ability, while at the same time using work activity as part of rehabilitation.
- Reduced employer misinterpretation of the appropriate work activity assignment
- Provider can release the patient to full work duty and determine end of healing status with the confidence that the tasks can be safely performed.
- Therapist communicates to the patient that the provider takes interest in their occupational demands, which increases the patient's resilience in coping with their work injury and return to work process.
- **Quote from Dr William E. Wessels, MD - Orthopaedic Surgeon & Sports Medicine at Bone & Joint Clinic S.C.:**

- "Job Function Matching helps to enhance my care of patients with WC injuries by having the therapist at the company taking actual objective measurements of what the work demands are and what the patient's capabilities are throughout the healing process."
- **Quote from Dr Kulpreet K. Sahota, MD - Physical Medicine & Rehabilitation/Pain Management at Bone & Joint Clinic S.C.:**
  - "I believe Job Function Matching benefits my patients by helping them to fully understand that even though they may have pain, they are still able to safely function at work. Because the patient is a part of the Job Function Matching, they are provided with a sense of control, which aids in the patient's recovery."

#### **Benefits for the medical group case manager**

- The on-site therapist encourages injured workers, who may not have wanted to engage in modified duty, to do so and gives assurance that the injured worker will not perform duties beyond their functional ability.
- Therapist intervention quickens progression through the return to work transition to end of healing status.
- Having the therapist involved also makes it less likely for the treating physician to feel the need to place the injured worker in an "off work" status.

#### **Benefits for the Employer/WC Insurance Claim Handler**

- Work place ergonomics and accommodating the injured worker.
- Clarity of transitional work.
- Reduces re-injury potential for injured worker.
- Reduces lost time days/restricted duty days.
- Reduces inappropriate illness behaviors.
- Reduces ADAAA risk.

#### **Benefits for the Injured Worker**

- Keeps the injured worker safely employable.
- Job modifications reduce risk of re-injury and speed recovery.
- Workers have the confidence that their employer cannot ask or allow them to do work beyond their functional ability.
- The therapist is neutral and objectively assesses their job demands and stressors.
- Minimizes antagonistic relationship with employer as disagreement about a work duty assignment is remedied by the therapist's objective testing.
- Reduces time in transitional duty; facilitates the injured worker back to the work duties and life-activities that they enjoy.
- What injured-workers are saying about Job Function Matching:
  - **"I have been treating for my condition quite a while and this is the first time someone came to my job to really understand what I do. Because of the functional testing I have had at my job site, and the ergonomics improvements suggested to my employer, I feel more confident with return to work."**
  - **"It helped me keep a positive attitude regarding healing and work. I felt like I was an active participant in the return to work job function analysis and testing."**

#### **About the Authors:**

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#### ***COST EFFECTIVE DISABILITY MANAGEMENT, PART 2***

## By Mary Harris MS CRC

The most cost-effective disability management plans support employees. Serving people and saving money go hand-in-hand. It is necessary for organizations to **keep in mind the needs of the claimants in order to maximize employee satisfaction and minimize costs.**

Successful disability management depends upon the **adoption of a whole-of-organization approach.** Everyone from senior management, through supervisors and employees should be on board for the system to function efficiently, sustainably and supportively. If this commitment seems like a big task, just remember that the main skill needed is good project management, with just a little specialist expertise thrown in. **Disability Management Plan of Attack**

1. **Disability Management; In-house or External:** Depending on the size of your organization and the expertise at your fingertips, you might decide you need an external provider to help employees, managers and the organization as a whole to implement an effective disability management system. For both internal and external management, success is achieved by those who:
  - Understand the common issues
  - Can influence the whole organization, from senior staff to the factory floor
  - Recognize that their role is to facilitate and support
  - When involving external providers, a clear, written understanding of what the external provider will do and what will remain the responsibility of your organization is important.
2. **Senior Management Commitment:** The best way to engage senior managers is to present a business case that starts with an assessment of the costs of the existing approach including:
  - Direct costs such as the premium, any wages not covered by the premium, and other costs, such as health and safety fines
  - Indirect costs, including staff replacement, supervisor time, administration, which are estimated to be 4 times the direct costs.

The business case then presents the advantages of a well-managed system, which include reduced costs, improved morale, supervisors freed up to concentrate on productivity, and improved customer service.

3. **Communication with Workers.**
  - Involve employee representatives (e.g. trade union and health and safety representatives) at the beginning of the process and in problem solving
  - If you decide to confine your efforts to a limited section of your organization, consider how best to inform other employees
4. **Identify the Problems:** Whether your disability management system has been ad-hoc or bogged down in bureaucratic processes, chances are you've accumulated a few glitches. But you won't know unless you look for it.
  - **Informal audit**
    - A. Analyzing the financial costs
    - B. Understanding the most common injuries
    - C. Obtaining feedback from employees, supervisors and managers about how things are dealt with. Ask about whether people are satisfied with the current system and what can be improved:
  - **Formal audit.** This audit acts as:
    - A. An evaluative tool, to determine current disability management program performance
    - B. A corrective tool, to establish where program deficiencies are, highlighting remedial actions required
    - C. A program promotion tool, foregrounding disability management concepts for workers and demonstrating management's commitment to best practice.
5. **Find the Solutions:** Management can help by:
  - Asking their subordinates how people with a work injury are doing, and what is being done to help them
  - Calling workers with an injury, to ask how they are and whether the organization can do anything else to support them
  - Expecting monthly or quarterly reports about case numbers, costs, and any planned improvements to the system
  - Ask the focus group to brainstorm solutions to problems identified during the assessment.
6. **Take Action:** To implement disability management strategies, the devil is in the details. **An action plan should include:**

- What the problem is
- How the issue was assessed
- What the organization will do about the issue
- How the steps to improve were identified
- Key milestones and dates for them to be reached
- A commitment to provide feedback to employees on progress
- A date for reviewing actual changes against the plan

**Small actions** can let people know that their issue is important and being taken seriously. For example: An employee cuts his finger deep enough to sever the tendon. The supervisor takes the employee to the hospital, the doctor organizes rapid access to a plastic surgeon, and the manager calls the employee the next day to see how he is. Small, impromptu gestures can make a mighty difference.

7. **Maintain Good Management:** Disability management processes aimed at serving employees are the most efficient. This will save the company time and money, and employees the pain of flawed disability management.

Mary Harris is a disability specialist and certified rehabilitation counselor, who received her Master of Science degree in vocational rehabilitation counseling. Her experience includes vocational rehabilitation counseling in the public and private sectors, as well as a return to work coordinator for the University of Minnesota. She has also served as a vocational expert for the Social Security Administration. [mary@abilityadvisors.org](mailto:mary@abilityadvisors.org)

#### **LEGAL UPDATE: Functional testing, or lack of it, is important in case rulings**

WorkersComp Forum Update: How to Radically Change Workers' Comp July 14, 2011

**Case name:** Rambough v. C.V. Hill Refrigeration, No. A-5184-09T3 (N.J. Super. Ct. App. Div. 05/05/11).

**Ruling:** The New Jersey Superior Court, Appellate Division held that a punch press operator was permanently disabled

The employer presented the testimony of an employability expert who opined that the operator had transferable employment skills. She identified several jobs the operator could perform because they required hand movements that would be gross, not fine, movements. The employability expert did not perform dexterity tests. The operator presented her employability expert who performed dexterity tests and opined that she was unemployable. The court found the employer failed to rebut the finding that the operator was permanently totally disabled. The expert's failure to test the operator's hands prevented showing a connection between the operator's hands and the expert's findings.

#### **INJURY PREVENTION IMPORTANCE TO INDUSTRY**

An interview featuring Scott Ege PT MS, Ege WorkSmart Solutions and a DSI faculty member

The Rockford Registered Star (IL) newspaper featured an article on ergonomics and injury prevention on May 6, 2011 by Mike DeDoncker

**Quoting Scott Ege: "The best work-related injury is the one that never happened"** Ege, who spends about 12 hours a week at Schneider Electric, talks about business economics **"for a company to be profitable they need to be able to build a product at the lowest cost and sell it at a premium price.** Part of the cost on their bottom line is the impact of injuries that happen at work, and even injuries that didn't happen at work.

"We try to come up with proactive approaches to prevent musculoskeletal disorders because these are the most common and most costly type of injuries for employers. Employers spend billions of dollars a year on these injuries and those costs are continuing to rise because health care costs are rising, so **anything an employer can do to decrease experiencing those costs is a good thing to do from a business standpoint.**"

"In the end, I know plant managers who would say if I spend \$50,000 on this and in the end I end up saving five times that amount because I didn't incur those injuries, they'll look at that as an investment. When somebody gets hurt and they have to be treated, from that moment on it's an expense that they're not really getting any investment out of, so it's really money down the drain... They'd rather try to get ahead of the curve."

Congratulations Scott for this insight and recognition

***WELCOME NEW DSI PROVIDERS IN DSI JOB FUNCTION MATCHING AND FUNCTIONAL CAPACITY ASSESSMENT***

All new and current DSI providers can be accessed with the following link: [View DSI providers](#)

**New providers**

Align Therapy, Hayward, WI

Blue Ridge Physical Therapy, Johnson City, TN

Center for Muscle and Joint Therapy, Superior, WI

OSF/ Center for Industrial Rehab, Peoria, IL

Olmsted Medical Center, Rehabilitation Services, Rochester, MN

***FULL WORK INJURY MANAGEMENT WEBINAR SERIES NOW AVAILABLE***