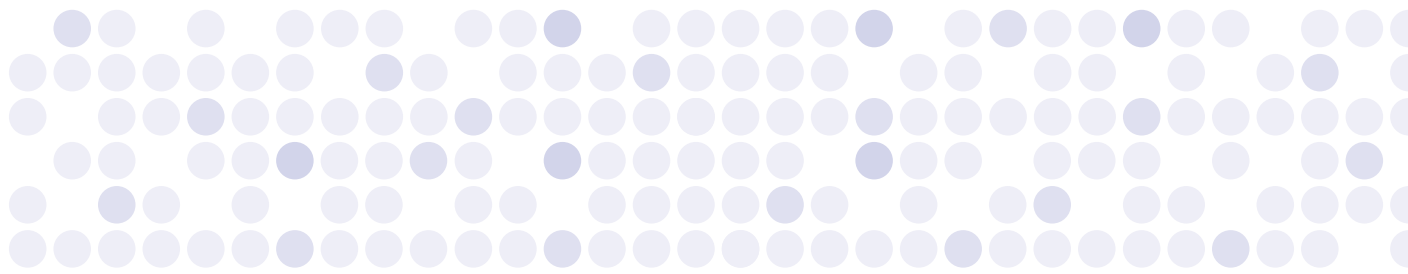


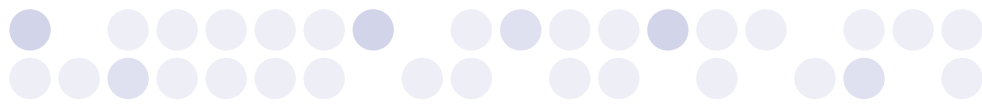
Identifying return to work risks





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Background

This tool is designed to help you identify return to work risk factors and give you some suggestions for how to manage them. It's not designed as a risk rating tool nor does the presence of more than one risk factor necessarily mean there is an increased risk of a poor outcome.

Most injured or ill workers can manage their health and return to their usual job. Most will only need a limited number of visits to their general practitioner and some physiotherapy or pain medication to help reduce symptoms. In a small number of cases certain risk factors can increase the worker's chances of not returning to work.

What are these risks and how can you manage them? Use this tool to help you identify whether your workplace is exposed to these risks.

Worker

Risk	Strategy
Worker has a heavy, difficult, dangerous or otherwise unpleasant job	Liaise with management regarding job rotation/potential job modifications, engineering out hazardous tasks.
Worker has a history of conflict with co-workers or supervisors	Acknowledge anger and conflict. Provide expert intervention to manage anger, conflict, hostility or grief.
Poor performance/attendance record	Investigate possible causes and recommend action (eg HR involvement). Modify workplace factors if possible. Provide expert intervention to manage anger, conflict or hostility.
Worker appears anxious and/or depressed (eg fear of re-injury or that they won't be able to return to work)	Discuss their fears with the treating doctor (with worker consent). Set small, manageable goals. Reinforce worker expectations of improvement. Acknowledge their distress. Enhance accurate beliefs that the worker may have about their recovery expectations. Emphasise and maintain their social connection with the workplace. Maintain regular communication with the injured worker.
Worker expresses belief that complete rest is required and that they need to be 100% fit to return	Liaise with treating doctor (with worker consent).
History of same or similar injury	Take steps to prevent similar injury and tell the worker about this.
Difficult to contact at home following injury	Try SMS, email or mail. Reinforce obligation to keep in contact.
Poor relationship between worker and insurer case manager	Acknowledge anger and conflict impartially. Discuss with case manager and escalate if no resolution. Keep in mind workers with serious injuries may be going through a grieving process - this may be manifesting as anger or conflict.
Poor relationship between worker and rehabilitation coordinator	Acknowledge anger and conflict impartially. Try to identify the source - refer to insurer case manager for assistance. Keep in mind workers with serious injuries may be going through a grieving process in relation to losses - this may be manifesting as anger and conflict.
Delay in claim lodgement	Educate all parties about the benefits of early lodgement (eg reduces the likelihood of loss of income, speeds up payment for treatment). Train workers in procedures. Develop systems to detect work related injury absences.
Worker expresses belief that continuing to work will cause further harm	Liaise with treating doctor (with worker consent).
Worker has no income for an extended period following injury and/or claim lodgement	Check claim has been lodged, liaise with insurer, arrange for payment of sick leave or annual leave, reimburse if claim is accepted, refer worker to Centrelink or other community agencies.

Workplace

Risk	Strategy
Does not have systems for identification of injuries likely to lead to claims	Develop systems, educate and train all staff to report injury/illness.
Recent restructuring or downsizing	Consult HR for change management strategies.
Workplace has a record of similar injuries	Report to/liaise with management about possible job modification, job rotation, engineering our hazardous tasks if possible.
History of poor worker/management relations	Acknowledge anger and conflict impartially. Provide expert intervention to manage anger, conflict, hostility or grief.
Employer not required to have a rehabilitation and return to work coordinator, or procedures for rehabilitation	Maintain close liaison with the insurer. The longer the absence from work the higher the premium. By appointing a rehabilitation and return to work coordinator and providing suitable duties for injured workers you can decrease this.

Injury

Risk	Strategy
Complex injury (eg fracture, psychological injury) with expected absence > 2 weeks	Initiate and maintain close liaison with the injured worker, treating doctor, worker's supervisor, and insurer case manager. Consider appointing a rehabilitation provider to assist (insurer may or may not approve payment of this service).
Injury developed over a period of time	Encourage workers to report early signs of injury and seek treatment. Consider job modifications or suitable duties until the condition settles.
Injury not reported immediately	Provide training and information about the need to report injuries immediately.
No obvious event/incident	Advise the insurer of your concerns. Investigate and report promptly to the insurer as timeframes are limited.

Medical factors

Risk	Strategy
Worker frequently changes doctor	Notify the insurer of your concerns.
Worker not compliant with treatment (eg attendance for physiotherapy)	Notify the insurer promptly. Discuss reasons with the worker. Liaise with the treating doctor.
Treating doctor not supportive of workplace rehabilitation. This may be due to: <ul style="list-style-type: none"> • potential conflict of interest if doctor provides advice which the worker does not agree with • unavailability to visit or familiarise themselves with the workplace may cause them to err on the side of caution • their duty of care being to their patients - not insurers or employers • the time needed to assess complex issues. 	Notify the insurer promptly. Book a consultation with the treating doctor to discuss (you will need to pay for this consultation). Acknowledge that their time is limited and that they may not be familiar with the workplace. Be prepared - have a list of questions which you have faxed ahead. Ask about function and risk factors, not just diagnosis. Discuss with the injured worker. Ask your company doctor to liaise with the treating doctor. Provide doctors with copies of reports or assessments to assist them to provide good advice for return to work strategies or workplace alternatives.
An independent medical assessment indicates inconsistencies between the reported symptoms and the injury	Discuss with the insurer.
Treating doctor and company doctor disagree on prognosis and treatment	Discuss with the insurer. Ask company doctor to liaise with treating doctor to discuss.