



Leadership Initiatives for RTW: Use of the Official Disability Guidelines

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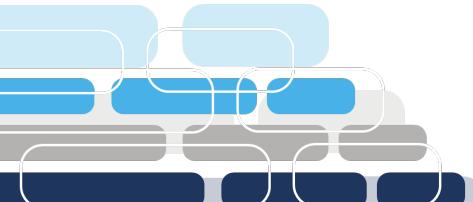




Official Disability Guidelines (ODG)??

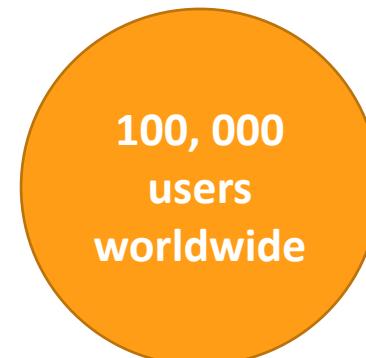
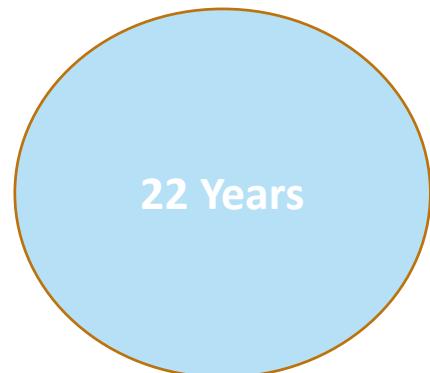


- Expert Level ODG
- Know of ODG, keen to learn more
- New to ODG

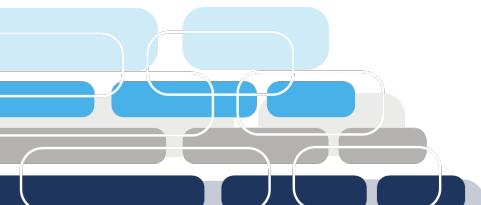


Official Disability Guidelines (ODG)??

- The ODG provides independent, evidence-based medical treatment guidelines and return-to-work guidelines for conditions commonly associated with the workplace.
- By following the guidelines, medical treatment is streamlined, ensuring injured workers receive the correct level of support and corresponding treatment as quickly as possible.
- This helps the worker achieve a positive outcome by returning to work in the best possible physical and mental health.



- ODG is produced by MCG Health, which ODG consider the worldwide leader in evidence-based treatment guidelines.
- The guidelines and formulary drive effective care, resulting in better outcomes and cost savings
- Over 4,000 organisations use MCG care guidelines and software solutions, including eight of the largest U.S. health plans, nine of the 10 largest workers' comp insurers, and more than 1,700 hospitals.
- ODG have also introduced the **TAO Index**, or **Treatment Analyzer on Outcomes**, measuring the correlation of each medical intervention with timely RTW, helping to select the most appropriate treatment intervention for the injury, with RTW in mind.





Return-To-Work Summary Guidelines		
Dataset	Midrange	At-Risk
Claims data	42 days	88 days
All absences	24 days	85 days

Physical Therapy Guidelines:

Allow for fading of treatment frequency (from up to 3 visits per week to 1 or less), plus active self-directed home PT

Medical treatment: 1-3 visits over 3-5 weeks

Post-surgical treatment (endoscopic): 3-8 visits over 3-5 weeks

Post-surgical treatment (open): 3-8 visits over 3-5 weeks

Return-To-Work "Best Practice" Guidelines

Conservative treatment, modified work (limit repetitive use of hand/wrist): 0 days

Conservative treatment, regular work (if not aggravating to disability/use of splint): 0-5 days

Conservative treatment, regular work (if work related & electrodiagnostically confirmed): 28 days

Conservative treatment, regular work (with severe nerve impairment): 63 days

Endoscopic/mini-palm surgery, modified work: 3-5 days

Endoscopic/mini-palm surgery, regular work, non-dominant arm: 28 days

Endoscopic/mini-palm surgery, regular/repetitive/heavy manual work, dominant arm: 42 days

Open surgery (median nerve neurolysis), modified work: 10-14 days

Open surgery, regular work, non-dominant arm: 42 days

Open surgery, regular/repetitive/heavy manual work, dominant arm: 56 days

Open surgery, regular/repetitive/heavy manual work, bilateral: 84 days

Pregnancy comorbidity, modified work until 28 days after delivery

ODG Sample

Capabilities & Activity Modifications for Restricted Work:

Modified work: Repetitive motion activities (w or w/o splint) not more than 4 times/hr; repetitive keying up to 15 keystrokes/min not more than 2 hrs/day; gripping and using light tools (pens, scissors, etc.) with 5-minute break at least every 20 min; no pinching; driving car up to 2 hrs/day; light work up to 5 lbs [2 kg] 3 times/hr; avoidance of prolonged periods in wrist flexion or extension.

Regular work (if not cause or aggravating to disability): Repetitive motion activities not more than 25 times/hr; repetitive keying up to 45 keystrokes/min 8 hrs/day; gripping and using moderate tools (pliers, screwdrivers, etc.) fulltime; pinching up to 5 times/min; driving car or light truck up to 6 hrs/day or heavy truck up to 3 hrs/day; moderate to heavy work up to 35 lbs [16 kg] not more than 7 times/hr.



ODG Comorbidity Calculator™

Show All: This option will show at-a-glance disability duration projections using each dataset and allow the user to select the one that best fits the underlying claim.

Change Dataset: Show All ▾

RAS (Risk Assessment Score): 78.96

Savings Calculator Clear Print URL

Duration Projections by Dataset (use + to select the best fit)

	Best Practice (+)	Claim Typical (+)	Claim Max (+)
Adjusted Duration (in Days)	17	105	213

Add Claim ID and contact info (for printing/documentation)?

Date of Injury: MM/DD/YYYY ▾

State: ▾

DOL Job Class: ▾

Confounding Factors:

- Depression/PTSD/Psychosocial
- Diabetes
- Legal Representation
- Obesity
- Opioids
- Substance Abuse

Diagnosis Codes:

Search in: ICD10 database ICD9 database

Show Guidelines

354.0 - Carpal tunnel syndrome

Target RTW Date:

Claimant Age:

- Hypertension
- Smoker
- Surgery or Hospital Stay

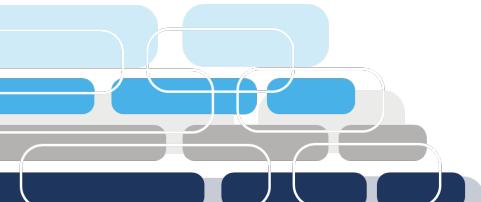
User Notes:



Outcomes

Adoption of the Official Disability Guidelines has led to:

- Significant medical cost savings of 25% to 60%
- Average disability duration down by 34% to 66% (median duration down 30%)
- Access to care increased 42%
- Insurance premiums decreased 40% to 49%





So What?

Now, what do we do with all this valuable information?

The two words 'information' and 'communication' are often used interchangeably, but they signify quite different things. Information is giving out; communication is getting through.

Sydney J. Harris

Health Benefits of Good Work (HBOGW)



- ODG can be used to help support HBOGW
- ODG provides evidence-based guidelines for treating health practitioners to identify when it is safe and helpful for a Worker to RTW
- “Bob has been missing out on the Health Benefits of Good Work for (*insert time unfit*) now and is starting to be impacted by the negative effects of worklessness. I am wondering if we could use the Official Disability Guidelines to help us create a safe and durable way for Bob to again experience the HBOGW?”

*Long-Term Worklessness: Health Risk
Equivalent to Smoking 10 Packs of
Cigarettes a Day*
Professor Sir Mansel Aylward

*Worklessness causes an increase in child abuse and
domestic violence as measured by hospital
admissions.*

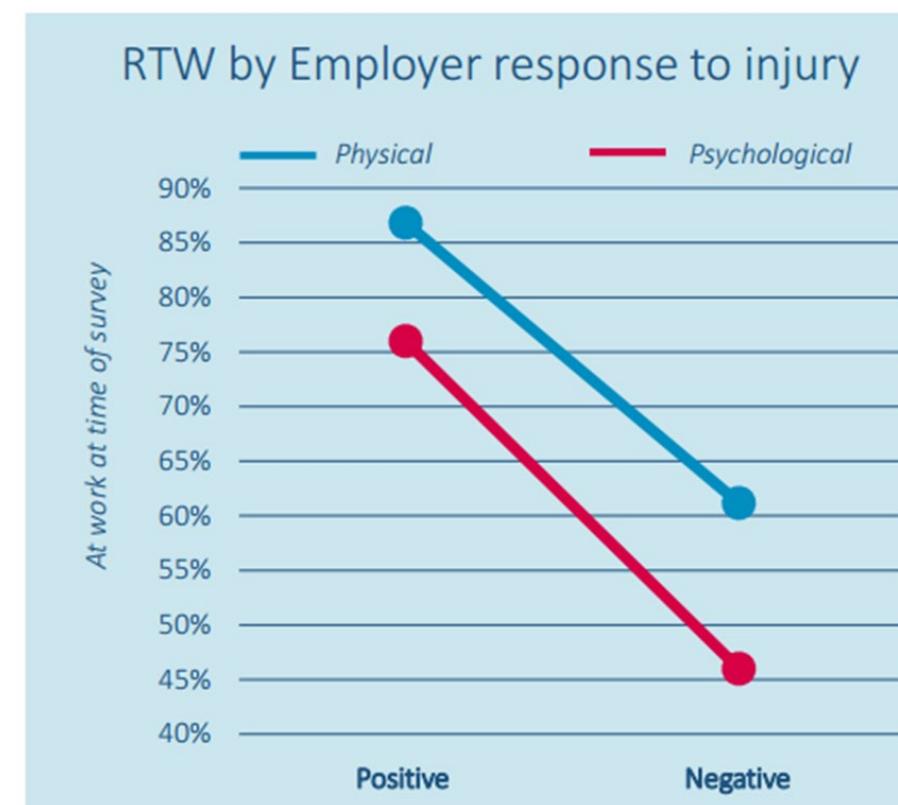
Psychosocial Impacts on RTW

- Diagnosis is not a predictor to RTW (OECD, 2007).
- The Psychosocial impacts on RTW, and its weighting beyond medical diagnoses, are well documented.
- Despite this, assessments remain centred solely on medical or liability factors, and recommendations are centred around medicalisation of the issue.

✓ 43% improvement in RTW rates for physical claims

✓ 65% higher RTW rate in psychological claims

Ref: RTW Survey: Safe Work Australia, 2016 & Dr Mary Wyatt





Loss of confidence & sense of self worth: Lose work status – secondary psychological conditions

No incentive to RTW, nothing to look forward to

Sleeping in

Eating More

TV – Jerry Springer & legal ads!

Secondary issues: Frozen shoulder / chronic pain

Ruminate on incident – blame Employer / Others

Financial impact – step down in wages / loss of penalties

Provider unable to achieve medical upgrades in capacity as not demonstrating functional ability to Doctor in work / practically

Take on childcare/ home duties

Relationship breakdown / Marital issues



Fear RTW – What will they think of me?

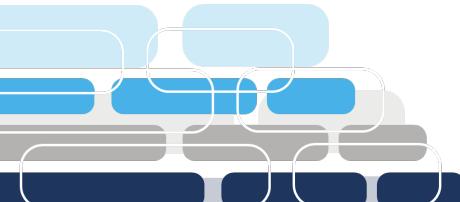
Unfit/Sedentary

Fear: re-aggravation



Psychosocial Impacts on RTW

- The psychosocial impacts on RTW are well documented. What do you think is causing Bob's RTW to surpass normal RTW trajectories for his injury and age?"
- "I have noticed that Bob has been losing confidence at home and engaging in fear avoidant behaviour. I'm really concerned that this will impact on his successful recovery as per the ODG. I was hoping to put some strategies in place to support Bob with this."
- **Work is not the cause of the problem, but the solution to the impacts of worklessness.**



It is far more important to know what person the disease has, than what disease the person has!

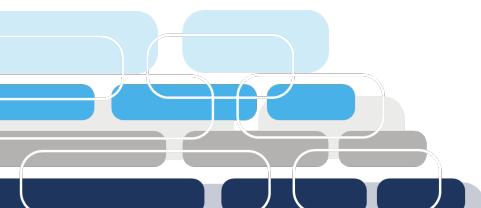
Suitable work has been shown to benefit people suffering from a wide range of psychiatric conditions ... anxiety, depression, bipolar disorders and schizophrenia.



“Do No Harm”

- The mantra, often attributed to the medical profession, is “do no harm”
- Focus is on the medical aspects – pain, damage (physical or psychological)
- We need re-focus, and highlight
 - the psychosocial harm
 - the worklessness harm
- Supported by evidence - ODG

Evidence shows the long-term negative consequences of advising a patient to remain away from work or to take time off work ... are often greater than those of the original health problem.



RTW Planning

- For the workplace and RTW Coordinators, the ODG gives very clear RTW guidelines that can be used for claim estimations and RTW Planning.
- It can also be used to set clear expectations to the worker and case stakeholders
- Given the afore outlined impact of psychosocial factors, if the case does not appear to be following the evidence-based RTW Guidelines, it allows the conversation to be opened up to:
 - Why not?
 - What are we going to do to bring recovery back on track?

ODG Return-To-Work Pathways (*lumbar sprain and lumbago*)

Mild (Grade I)¹, clerical/modified work: 0 days

Mild, manual work: 7 -10 days

Severe (Grade II-III), clerical/modified work: 3 days

Severe, manual work: 14-17 days

Severe, heavy manual work: 35 days

ODG Capabilities & Activity Modifications for Restricted Work:

Clerical/modified work: Lifting with knees (with a straight back, no stooping) not more than 2 kg up to 3 times/hour; squatting up to 4 times/hour; standing or walking with a 5-minute break at least every 20 minutes; sitting with a 5-minute break every 30 minutes; no extremes of extension or flexion; no extremes of twisting; no climbing ladders; driving car only up to 2 hours/day.

Manual work: Lifting with knees (with a straight back) not more than 11 kg up to 15 times/hour; squatting up to 16 times/hour; standing or walking with a 10-minute break at least every 1-2 hours; sitting with a 10-minute break every 1-2 hours; extremes of flexion or extension allowed up to 12 times/hour; extremes of twisting allowed up to 16 times/hour; climbing ladders allowed up to 25 rungs 6 times/hour; driving car or light truck up to a full work day; driving heavy truck up to 4 hours/day.



Reporting

Official Disability Guidelines (ODG)

Injury/Intervention Type:	From ODG
Duration to RTW:	From ODG (comment on whether worker status is in line with ODG)
Duties/Restrictions:	From ODG
Comments:	From ODG

The ODG provides evidence-based medical treatment and disability duration guidelines used to minimize the impact of illness and injury in the workplace. They also are applied to improve as well as benchmark outcomes in workers' compensation and non-occupational disability. They are succinct, complete, and authoritative statements and standards developed based on an aggregate of over 10 million cases and a decade and a half of research, including a systematic medical literature review.

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Thank
you!

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