



Optimising outcomes for workers with back pain through enhanced selfmanagement and collaboration

Spinal Management Clinics



Dr Jon Ford Musculoskeletal Physiotherapist, PhD

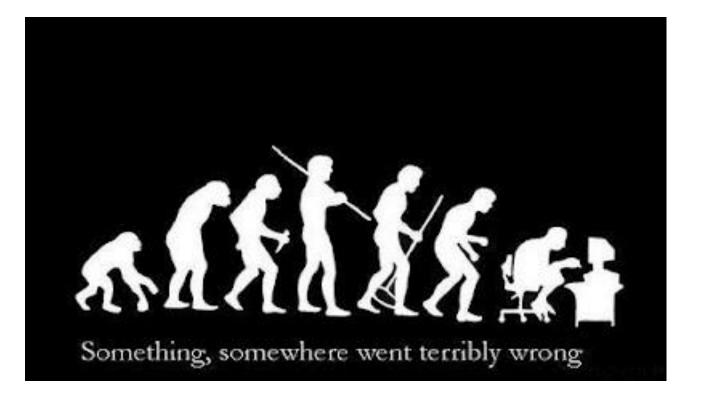
Clinical Director, Spinal Management Clinics Team Leader, Low Back Research Team, La Trobe University

Aim of today

- Employers helping employees embrace self management strategies for their health condition
- The importance of practitioners targeting specific roadblocks to recovery and RTW
- Collaborative relationships with trusted providers
- Examples/case studies



Scope of the LBP problem



Spinal Management Clinics

Up to 71% of people with recent onset LBP have persisting symptoms after 12 months

Itz et al 2013



Cost of LBP

Australia per annum

- \$8.1 billion
- 62,441,052 lost work days

Dagenais et al 2008



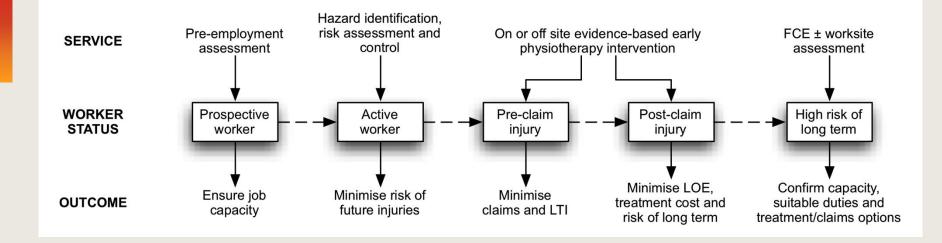
Intervention options

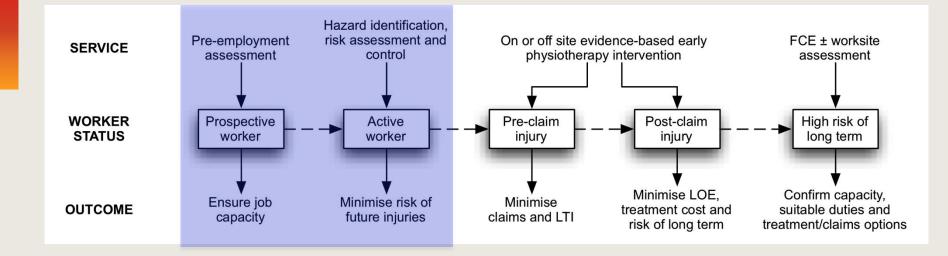
Prevent costly persistent pain/LTI

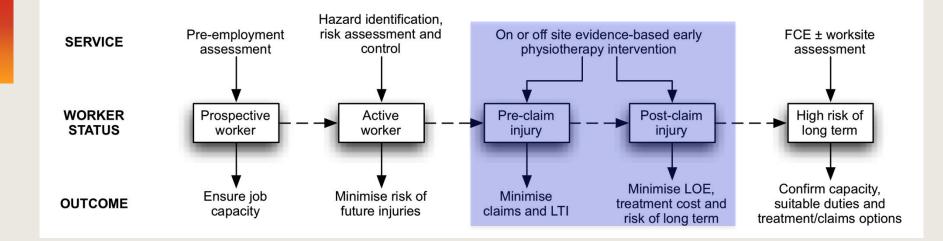
Enhance self management

Target specific barriers to recovery and RTW











Pre-claim

Employer intervention

Onsite or offsite medical and/or physiotherapy

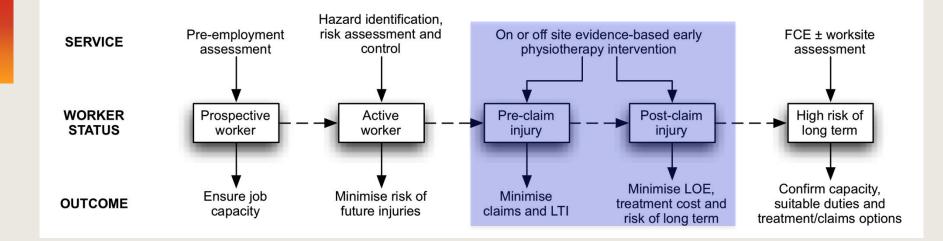
Work or non-work related injuries

Goal

- Identify risk factors (injury, psychosocial, general health, workplace)
- Intervene <u>minimally</u> to make long term change
- Facilitate self management

Case study

- 57 year old female
- Working on window assembly line 20 years
- Repetitive manual handling up to 10kg
- Slow onset of LBP early 2012
- Meranti timber added to product line (15kg)
- Symptoms deteriorated
- Claim August 2012 and LTI





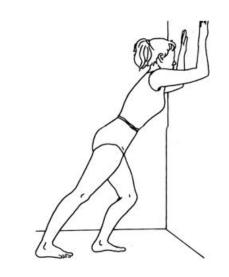
Relationships \rightarrow Early identification

Evaluate worker suitability to job

Static/repetitive tasks

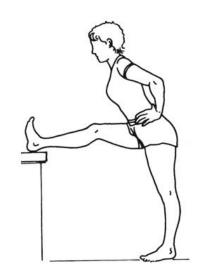
- Workplace modification
- STRUCTURED EXERCISE BREAK

















Relationships \rightarrow Early identification

Evaluate worker suitability to job

Static/repetitive tasks

- Workplace modification
- Structured exercise break
- POSTURAL/LIFTING TECHNIQUE



Manual Handling Code of Practice











Relationships \rightarrow Early identification

Evaluate worker suitability to job

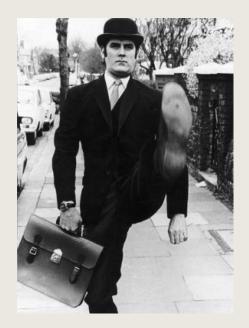
Static/repetitive tasks

- Workplace modification
- Structured exercise break
- Postural/lifting technique

SELF MANAGEMENT









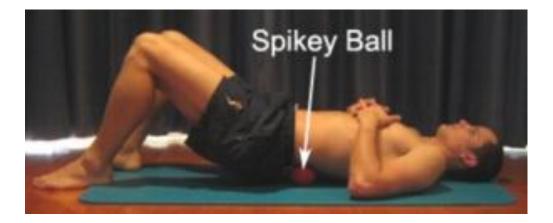














Importance of a trusted practitioner



Trusted practitioner

Relationships — Communication

Worker suitability -----> FCE

Static/repetitive tasks

Advice re workplace modification, exercise break, lifting technique

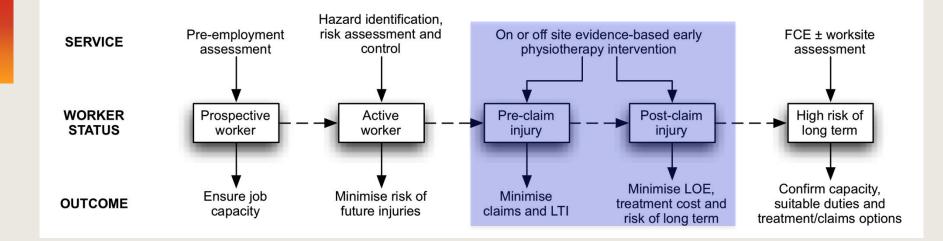
Self management — Reinforce

What happened next?

GP put worker off for 2 weeks Pain now radiating into both hamstrings Treatment

- Orthopaedic surgeon review Aug 2012
- Physio/hydro 5/week mostly passive
- Back brace







- Relationships \rightarrow Early intervention
- Evaluate worker suitability to job
- Early identification of yellow flags
- Clinical framework (WorkSafe)



Trusted practitioner

Relationships



Worker suitability ----> Certification

Yellow flags

 Clinical evaluation, education, appropriate treatment



Case study – clinical perspective

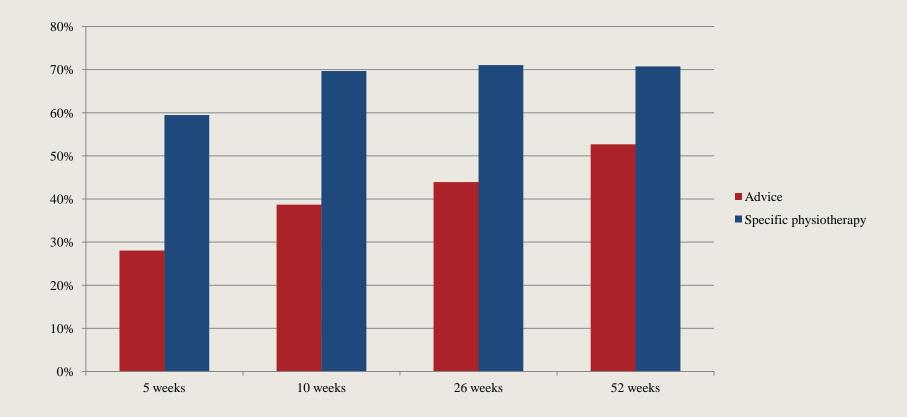
2 weeks off work – medically necessary? Surgical referral for back/hamstring pain? Back brace? High frequency, passive, ineffective treatment



Specific physiotherapy works

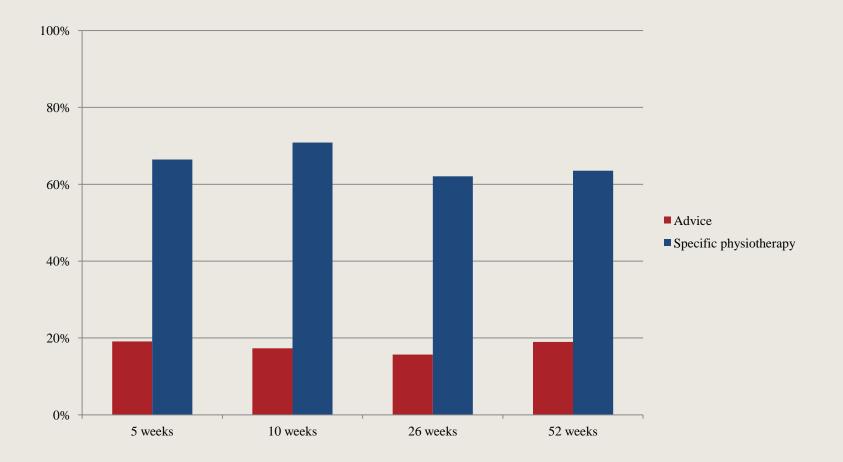






% participants at least "much improved"



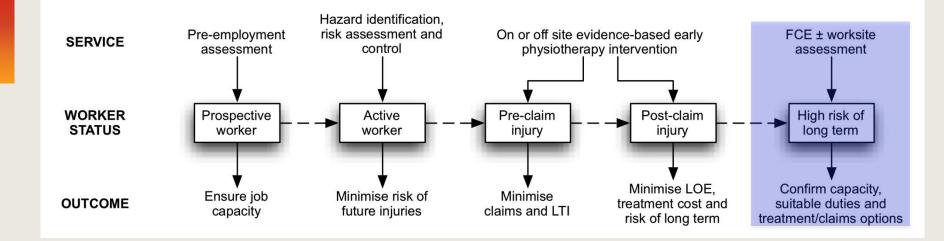


% participants at least "very satisfied"



How did she end up (Mar 2013)?

- 2 x 3 hours (no work on the floor, no prolonged sit/stand or repetitive bending)
- Ongoing high frequency treatment
- **ORP** involvement
- Suitable duties not being provided
- Put on 15kg
- Worker in process of engaging lawyer





Take home message

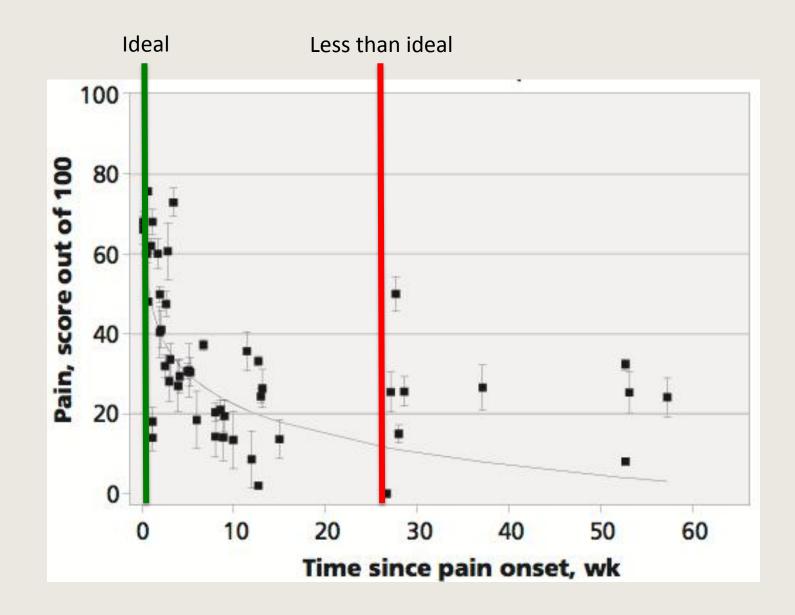
- Early intervention
- Pre-claim
- Post-claim
- **Employer** action
- Role of trusted practitioner
- Today's presentation only part of a complete injury prevention/management system





- Jon Ford
- (PhD, Musculoskeletal Physiotherapist)
- W: spinalmanagement.com.au
- E: <u>spinalmanagement@pac.com.au</u>
- M: 0422 244 183





Costa et al 2012

Multi-disciplinary pain management

Confirmation of physical and psychosocial barriers to recovery and pre-injury RTW

Intensive rehabilitation program (medical, physiotherapy, psychology) to address barriers

Move to self management

Pain management works



Network PMP

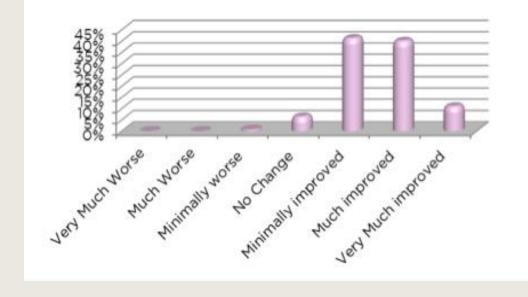
311 workers with persistent pain and complex physical/psychosocial factors

- 5-8 week rehabilitation program
- Follow up at 5 and 26-weeks post program

Compare network to "non-network" providers



Global Impression of Change



Preferred providers

WorkSafe nominated

- Occupational Physiotherapists
- Network Pain Management Programs

Individual organisations

Work outcomes

- Both network and non-network PMP resulted in improved RTW
- Network PMP resulted in superior RTW outcomes
- Cost savings far outweighed the cost of the Network PMP

Several workers gained new and sustained employment after years out of the workforce

• Major cost savings

Key purpose or pre-employment is to identify factors that may limit the capacity of the applicant to complete the job...

... whilst not discriminating against the applicant





Ask screening questions

Medical screen

Identify risk factors

Musculoskeletal screen

Match applicant to job

Functional capacity evaluation