

September 19th, 2019



AMERICAN SOCIETY OF
SAFETY PROFESSIONALS

**OnSite Health Recipe:
Blending Soft Tissue Wellness & Injury
Prevention Efforts**

Jeff Paddock, PT, MPT, MBA, CSCS, CES

Background/Experience



Jeff Paddock, PT, MPT, MBA, CSCS, CES

- ✓ BS, Louisiana State University
- ✓ MBA, Florida State University
- ✓ MPT, LSUHSC – New Orleans
 - ✓ 2005: Thanks, Katrina! (well, sort of...)
- ✓ First full-time onsite position at a large paper mill near Baton Rouge
- ✓ Director of OnSite Services for WorkWell Prevention & Care
- ✓ Responsible for worksite injury reduction program development in a variety of industries nationwide
- ✓ Active member of the American Physical Therapy Association and the Academy of Orthopedic Physical Therapy



Participants will be able to answer the following:


1. What are the challenges that require a solution proposed in this presentation?
2. What is “OnSite Health”?
3. What value can physical therapists provide for employers looking to maintain musculoskeletal health for their employees?
4. How do we demonstrate the value of our services in the onsite realm?

Section 1

Recognizing Challenges that Need a Solution



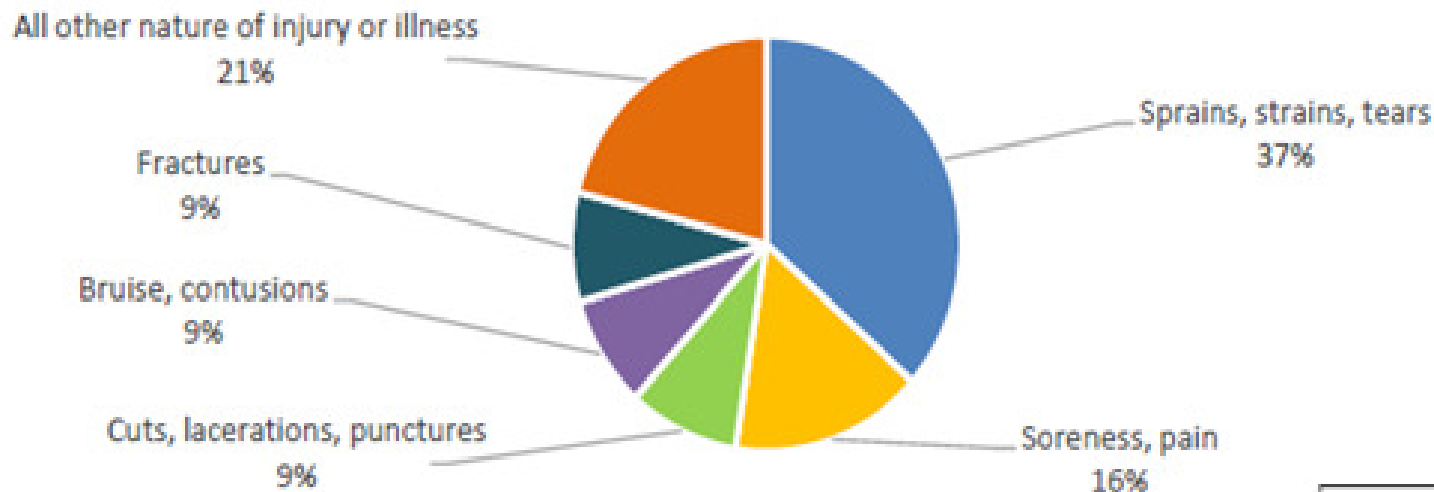
Most Debilitating, Expensive Work Injury

- Top cause of the *most disabling* U.S. workplace injuries is “**overexertion**”
- These injuries often result in lost work time secondary to recovery time  *most expensive*



BLS Data

Chart D. Percent distribution for occupational injuries and illnesses with days away from work by selected nature of injury or illness, all ownerships, 2015



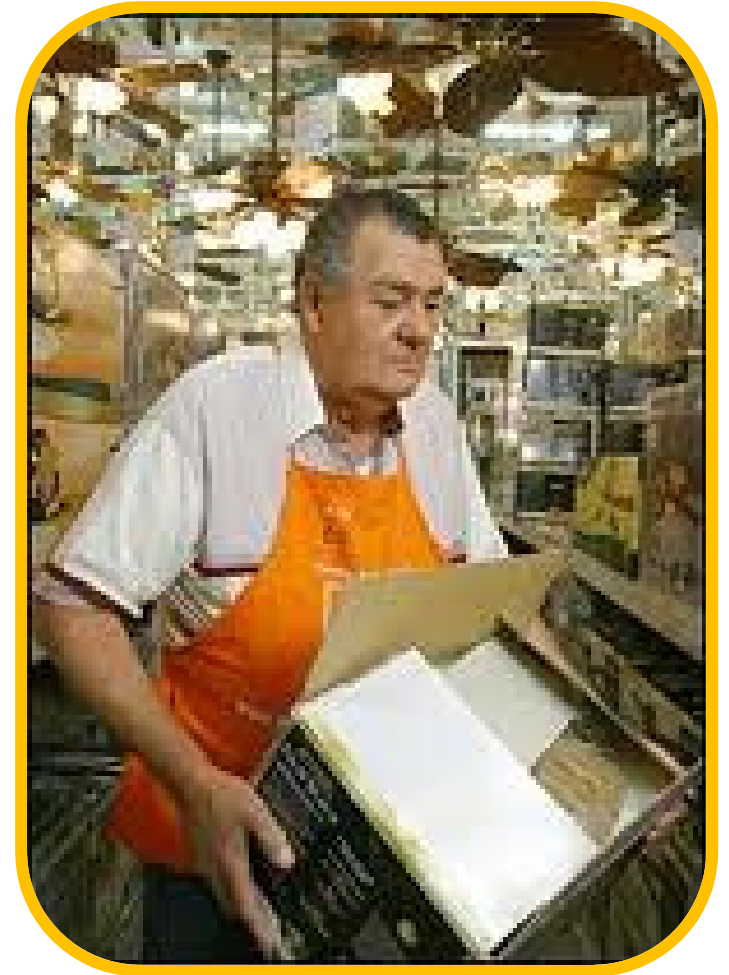
Total cases = 1,153,490

Note: Percentages may not add to 100 due to rounding.
Source: U.S. Bureau of Labor Statistics

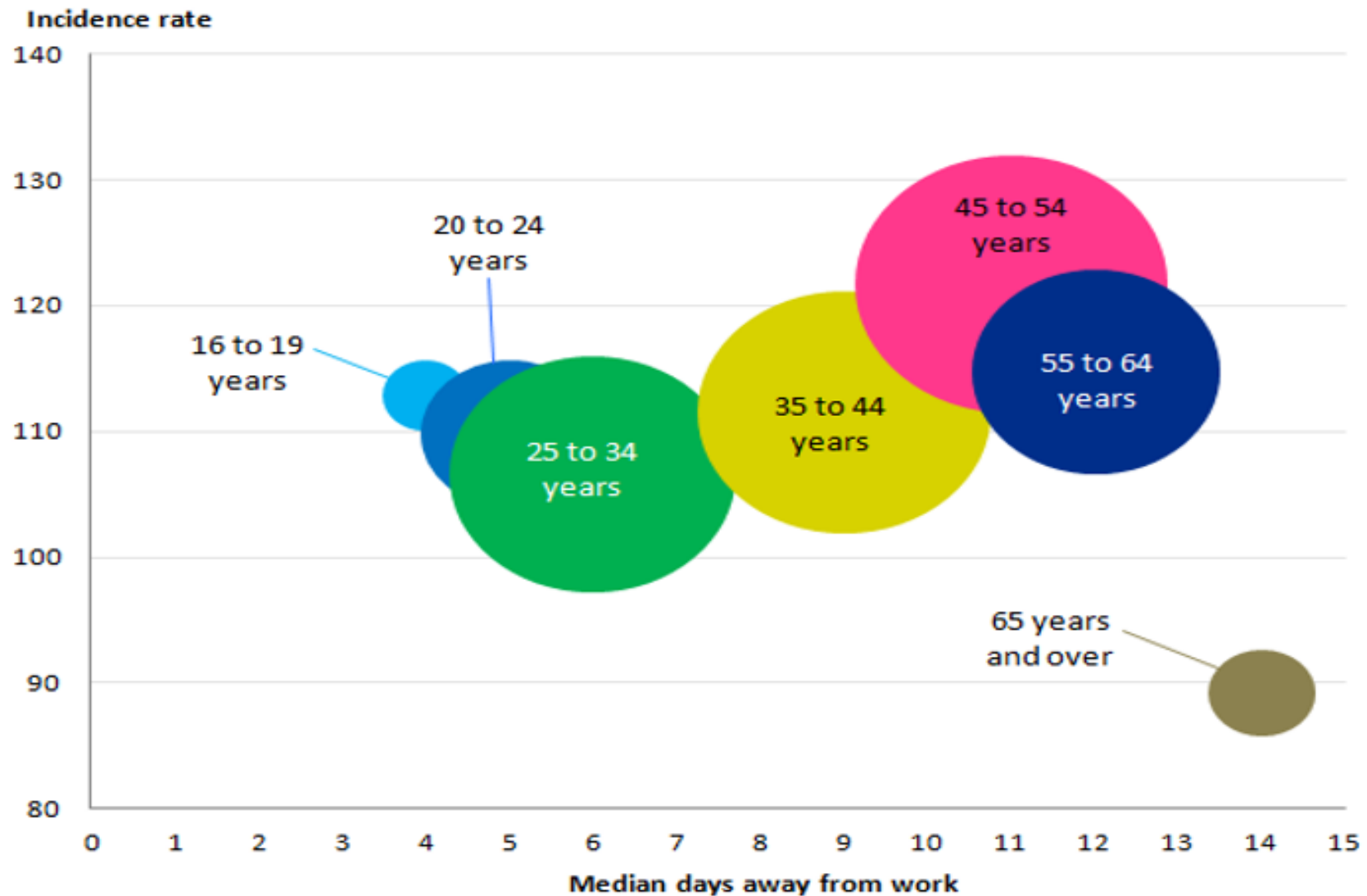
Source: Bureau of Labor Statistics - Nonfatal Occupational Injuries and Illnesses Requiring Days Away from Work-2015 (Nov. 2016)

Aging Workforce

- ✓ In 2016, the median age of the U.S. workforce was 42.2 years old
- ✓ In production, transportation and material moving occupations, it is 43.2 years old



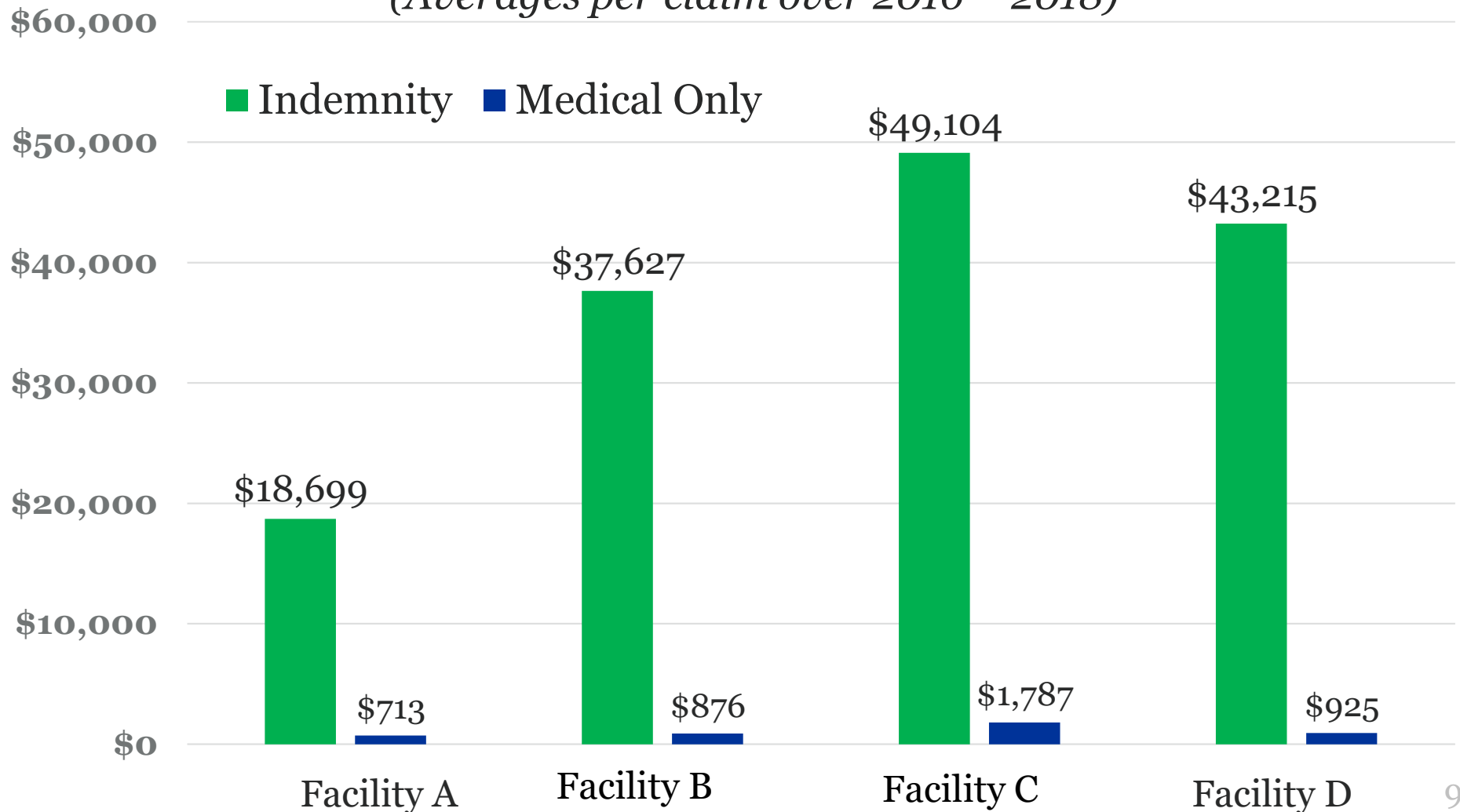
Aging Workforce



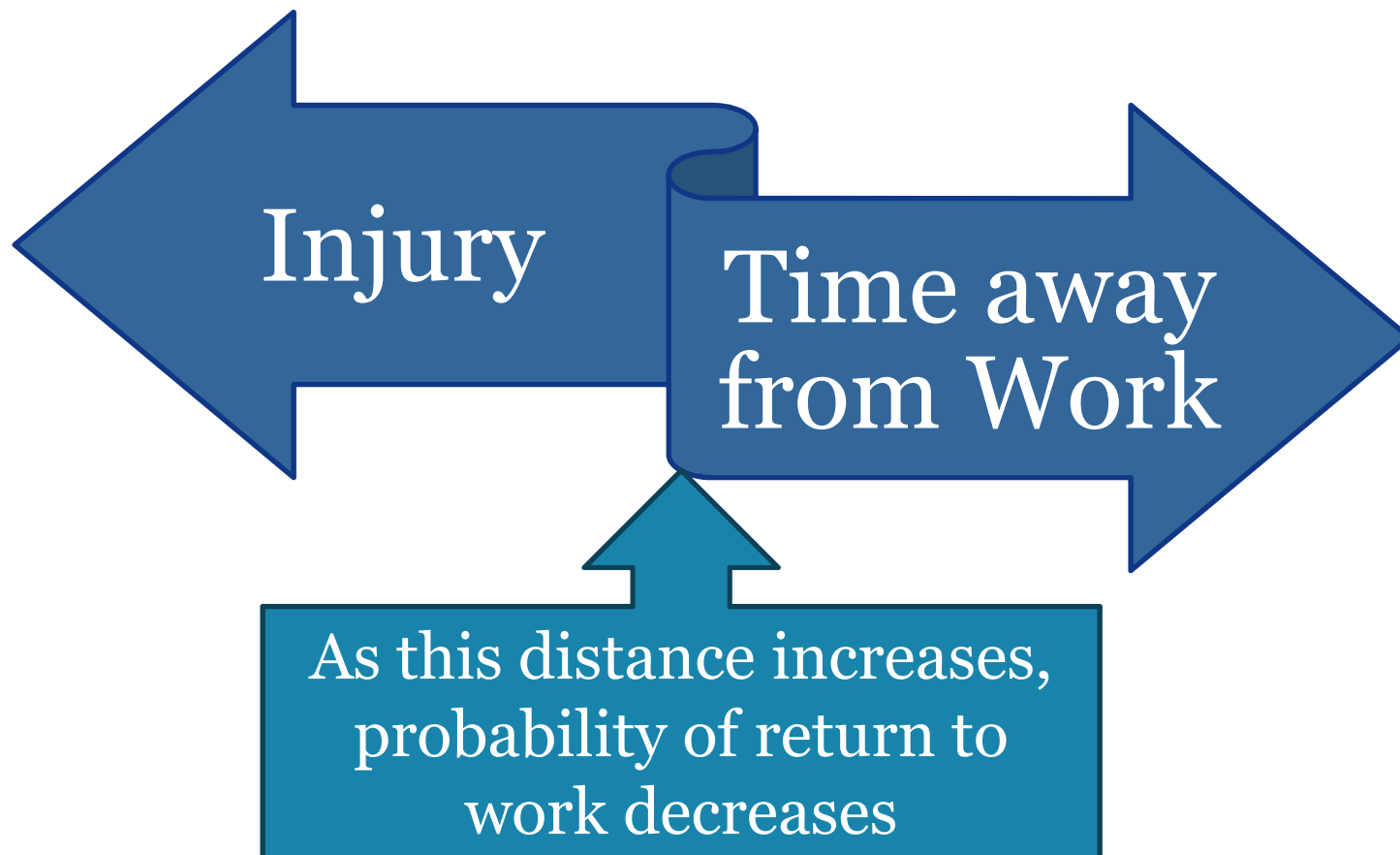
Note: The incidence rate is the number of incidents per 10,000 full-time workers.
Source: U.S. Bureau of Labor Statistics.

Medical Only vs. Indemnity Claims by Site

(Averages per claim over 2016 – 2018)



Absenteeism



How can injured workers still be in the mentality of work?

Productivity Demands

- ✓ **Manufacturing**—how many hours of labor does it take to make one widget?
- ✓ **Warehouse**—how many orders can get out the door each shift?
- ✓ **Transportation**—how fast can deliveries be made each day?



Everyone is BUSY

When the going get's tough, the tough sometimes cut corners...

- Enough eyes on employee habits during the busiest times?
- Sometimes the path of least resistance leads to more
STRESS



Section 2


What is “OnSite Health”?



Operational Definition for OnSite Health

Services provided by a *licensed healthcare provider* at an *employer's worksite* with the primary goal of *reducing musculoskeletal injuries* via a combination of various *injury prevention* activities and *clinical intervention*

Physical Therapists...at Work???



Services performed by a physical therapist at an employer's worksite

Typically includes a small clinic at the worksite

Keeps employees healthy and productive on the job with faster care, whether new hires or aging workers

What is so different about PT onsite?

	Traditional PT Clinic	Employer's Worksite
Space	Defined clinic space where people come for care	May include defined clinic space, but care also provided at employee's work area
Primary Program Focus	<ul style="list-style-type: none"> • Post-injury treatment/rehabilitation • Reactive care 	<ul style="list-style-type: none"> • Injury prevention/early intervention • Proactive care
Metrics	<ul style="list-style-type: none"> • Insurance authorization/reimbursement; • Provider productivity/ caseload volumes 	<ul style="list-style-type: none"> • Recordables • MSD Claims • DART • Employee satisfaction
Access to care	Physician or self-referral after an injury	Self-referral to services prior to an injury or referral by employer

Clinic Set-Up

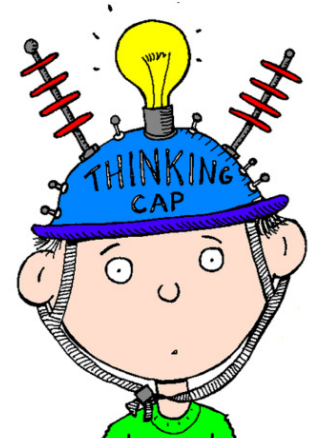


A good PT can
do a lot with a
10' x 12' space!



Section 3

What value can physical therapists provide to employers looking to maintain musculoskeletal health for their employees?



Expanding Use of PT's



The APTA notes that “... employers are warming to an idea already familiar to many physical therapists (PTs) and physical therapist assistants (PTAs): investing in prevention and wellness efforts makes sense both in terms of overall health care and company bottom lines.”

“Preventing non-communicable diseases among employees—or addressing them before they become symptomatic, disabling, and costly—is a smart move, and one that the physical therapy profession is poised to lead in collaboration with other disciplines.”

References: <http://www.apta.org/PTinMotion/News/2017/8/11/PopulationHealthWebpage/SectionPTinMotionNews>, **Population Health Resources Help PTs, PTAs Make the Case for Employer-Sponsored Programs**

2019 Letter of Interpretation Example



U.S. Department of Labor

Occupational Safety and Health Administration
Washington, D.C. 20210



MAY 23 2019

Sharon Dunn, PT, PhD
President
American Physical Therapy Association
1111 N. Fairfax Street
Alexandria, VA 22314

Dear Dr. Dunn:

Thank you for your letter to the Occupational Safety and Health Administration (OSHA) regarding 29 CFR Part 1904 Recording and Reporting Occupational Injuries and Illnesses. Specifically, you ask whether other techniques of soft tissue massage that are similar to Active Release Techniques (ART) would be considered first aid for purposes of OSHA recordkeeping.

In your letter, you state there are a multitude of soft tissue massage techniques administered by health care professionals, including physical therapists that are similar to ART. You note that OSHA has already determined that ART is first aid for recordkeeping purposes. You request that OSHA provide written guidance stating that soft tissue management (massage) is first aid for recordkeeping purposes, regardless of whether such treatment is performed by individuals with ART certification.

Proactive Vs. Reactive Approach

Which would you prefer?

Proactive



Helps protect you
from drowning.

Reactive



Thrown to you after
you're already drowning.

Employee Education

- ✓ Group or individual
- ✓ Newsletters
- ✓ “Tailgate Talks”
- ✓ Health Fairs
- ✓ New Hire Orientations
- ✓ Department Meetings



Safety Fair Participation



Build employee trust - Reduce injuries



The Workers' Compensation Institute (WCRI):
Trust in the employer ... a significant predictor for an injured worker's likelihood to return to work following an injury.

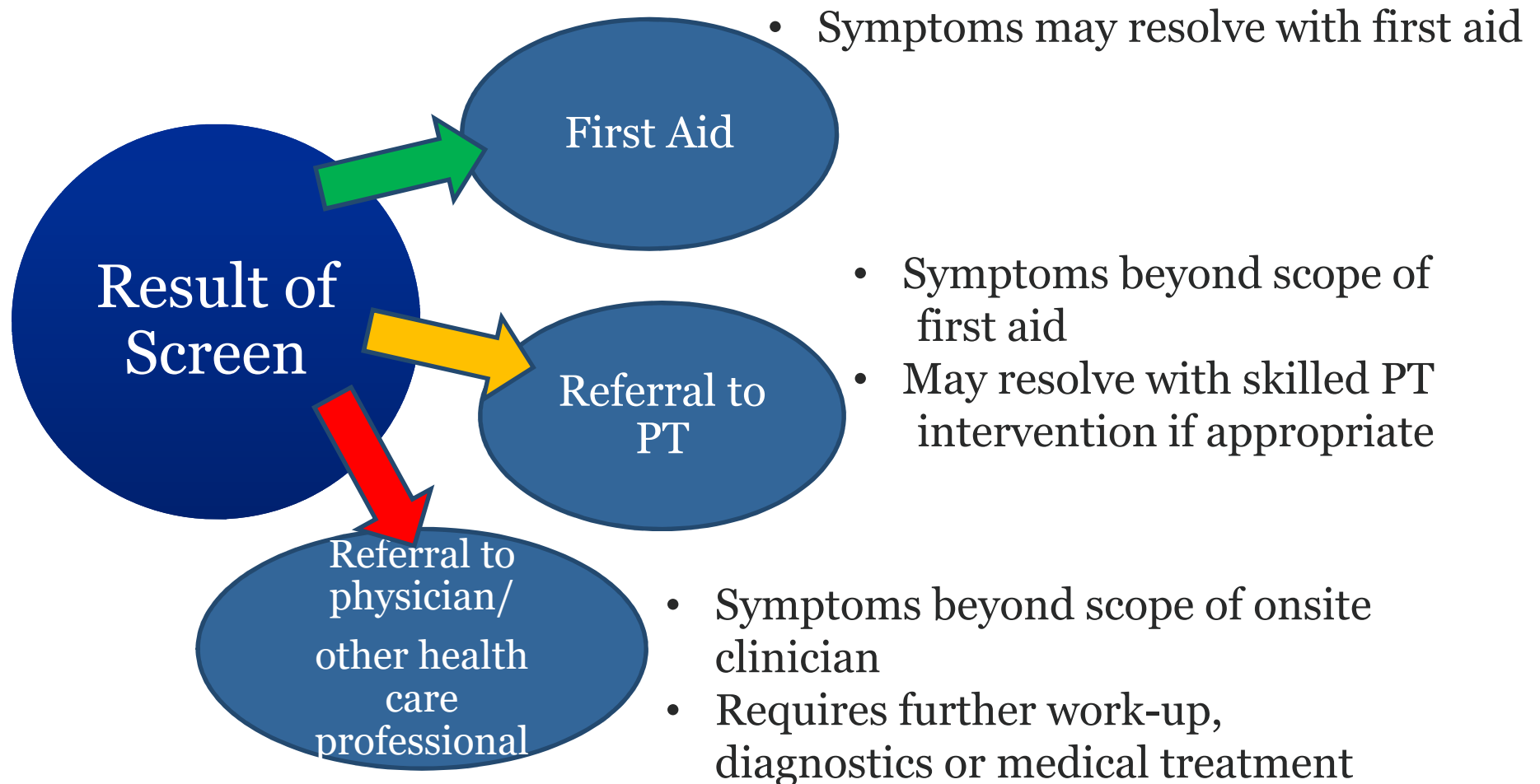
Low trust workers are 2x more likely to remain off the job when injured.



Change culture. Build trust. Through personal relationships between employees and physical therapists:

- An employee experience with faster answers & care
- A trusted face to ask for advice
- Familiarity with your workplace for coaching

Clinic Care Workflow



Typically includes both occupational & non-occupational care

Occupational Care: Care for symptoms or discomfort resulting from, or occurring during, work-related activities. The onset of symptoms may be specific to a single incident, or may be of a more insidious onset, such as pain/discomfort building up over a period of days/weeks due to the nature of work activities.

Non-Occupational Care: Care for symptoms or discomfort related to event(s) occurring outside of work time and workplace. Again, the symptoms may be specific to a single incident or a build-up of pain/discomfort over time.



OSHA allows for the following to be completed as first aid without causing a recordable injury:

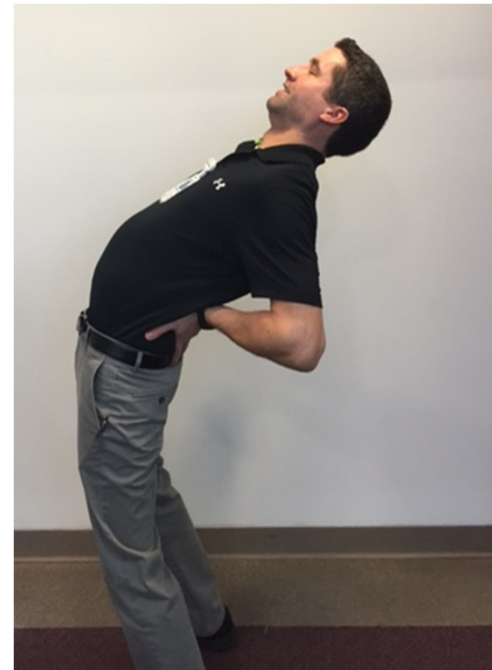
- ✓ Application of ice, heat and topical analgesics
- ✓ Taping (kinesiology tape, etc.)
- ✓ Provision of non-rigid orthotics/braces
- ✓ Soft Tissue Massage
- ✓ **Employee education & motivational interviewing**

Outside the Clinic

“The Four Walls” of
the Clinic are good,
but...



Job-Specific Wellness Programs



Body Area Wellness Programs

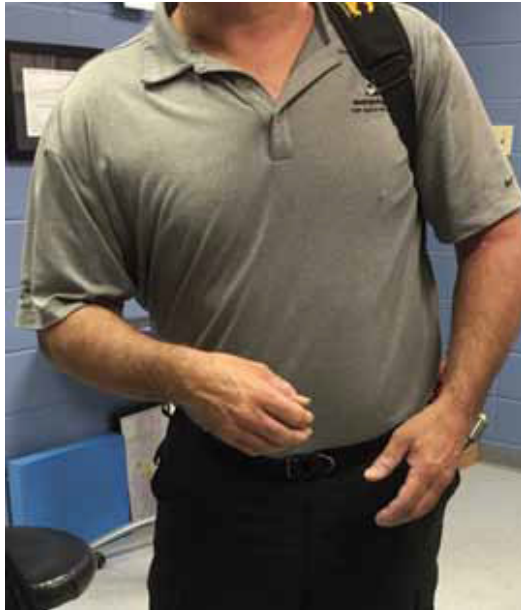
- ✓ Resistance band stations distributed across the site, and wellness programs created for the following body areas:
 - Neck
 - Shoulder
 - Low Back
 - Mid Back
 - Knee
 - Elbow
 - Wrist & Hand
 - Ankle & Foot
 - Hip



Job Coaching



Recognizing Patterns



SITUATION

- ✓ While conducting a final packaging operation an employee was picking up 40 lb. stacks of finished product and placing them in the packing crate.
- ✓ The employee was periodically performing the operation in a slow / cautious manner 2 hours into his shift when he experienced pain in his wrist and thumb area.
- ✓ Employee stated the discomfort was sudden in nature with no hint that his wrist was becoming fatigued.

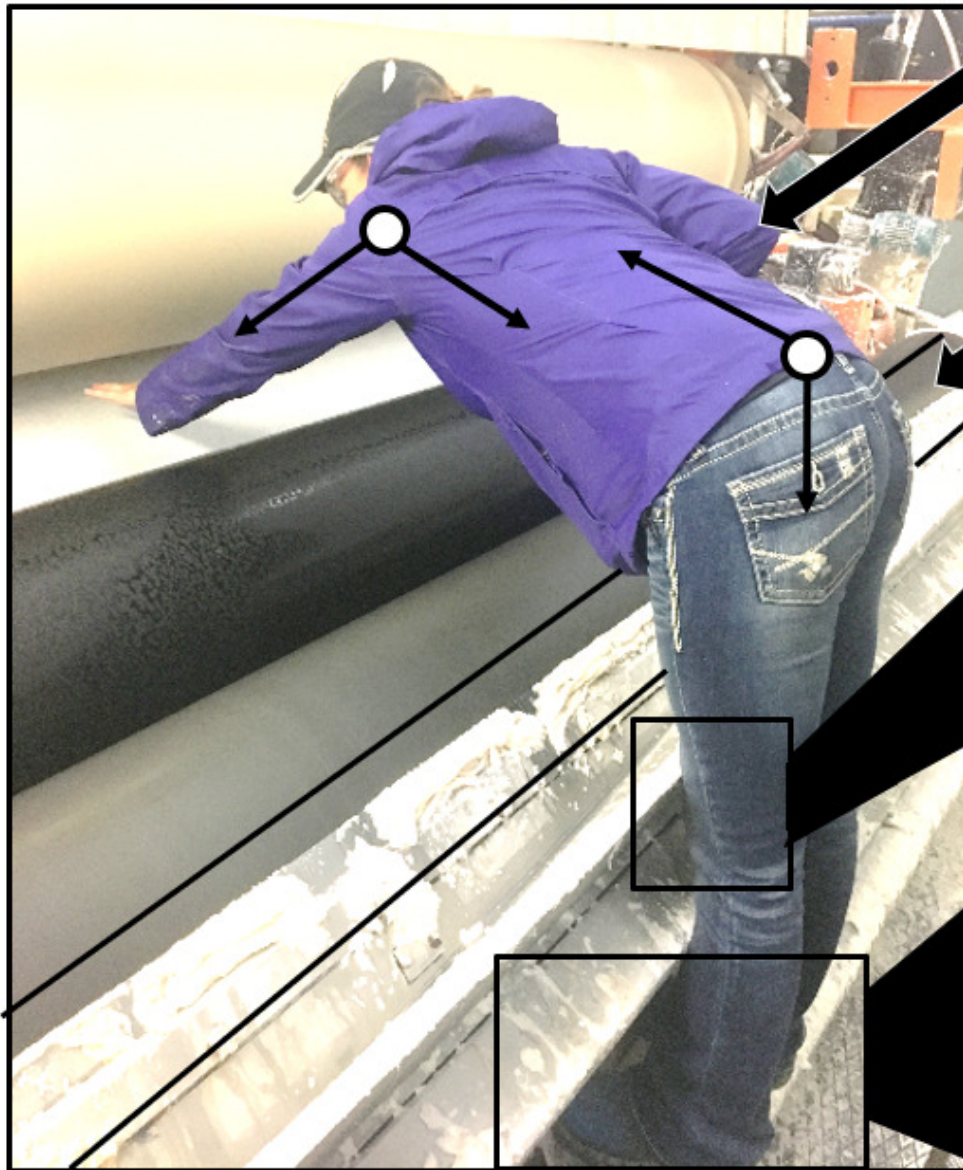
Root Cause Analysis: What's Wrong?



Root Cause Analysis: SOLUTION



Ergonomics Problem

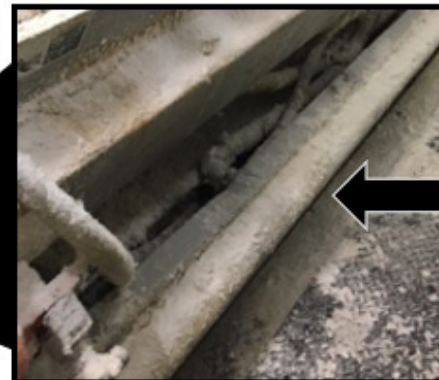


Awkward postures of shoulders & trunk
Required Reach: 42" ; Average Reach: 19.1 – 29.3"

Contact with sharp object – reaching
over lower doctor blade

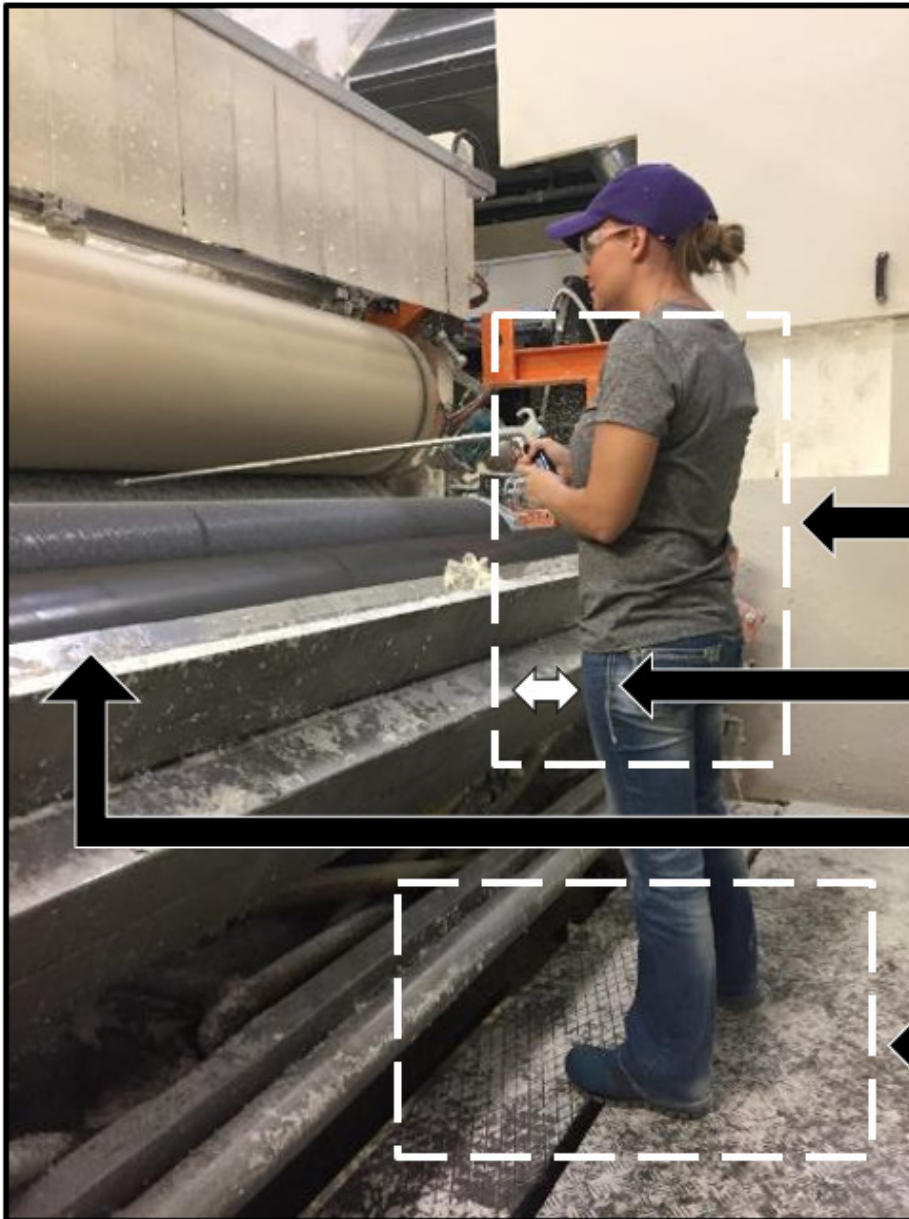


Contact stress from glue
tray on front of thigh



Slip / Trip / Fall –
standing on
round, slippery
surface

Ergonomics Solution



Safe work zone and upright posture

No contact stress from glue tray on front of thigh

No longer required to reach over doctor blade

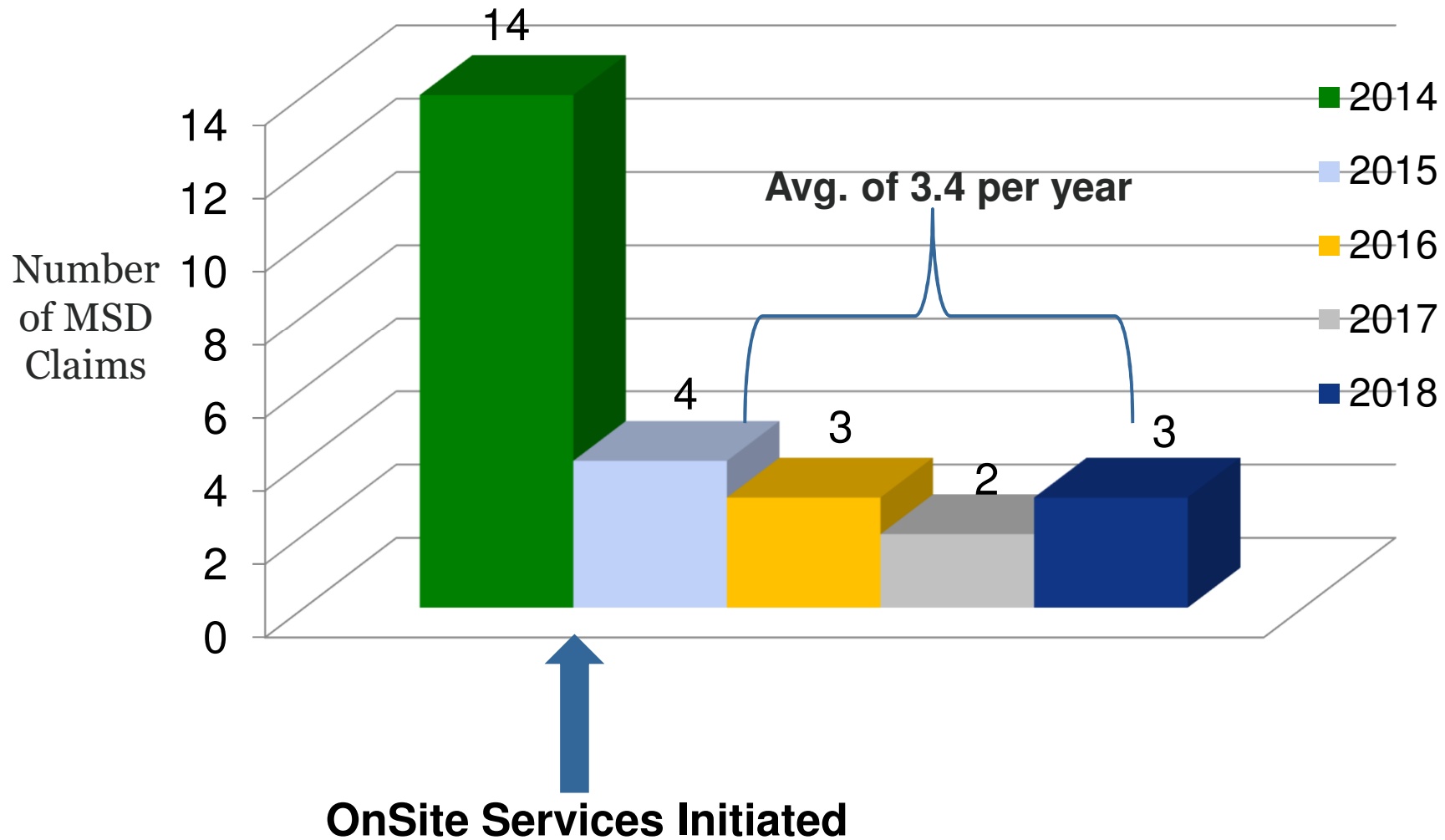
Able to stand on work surface

Section 4

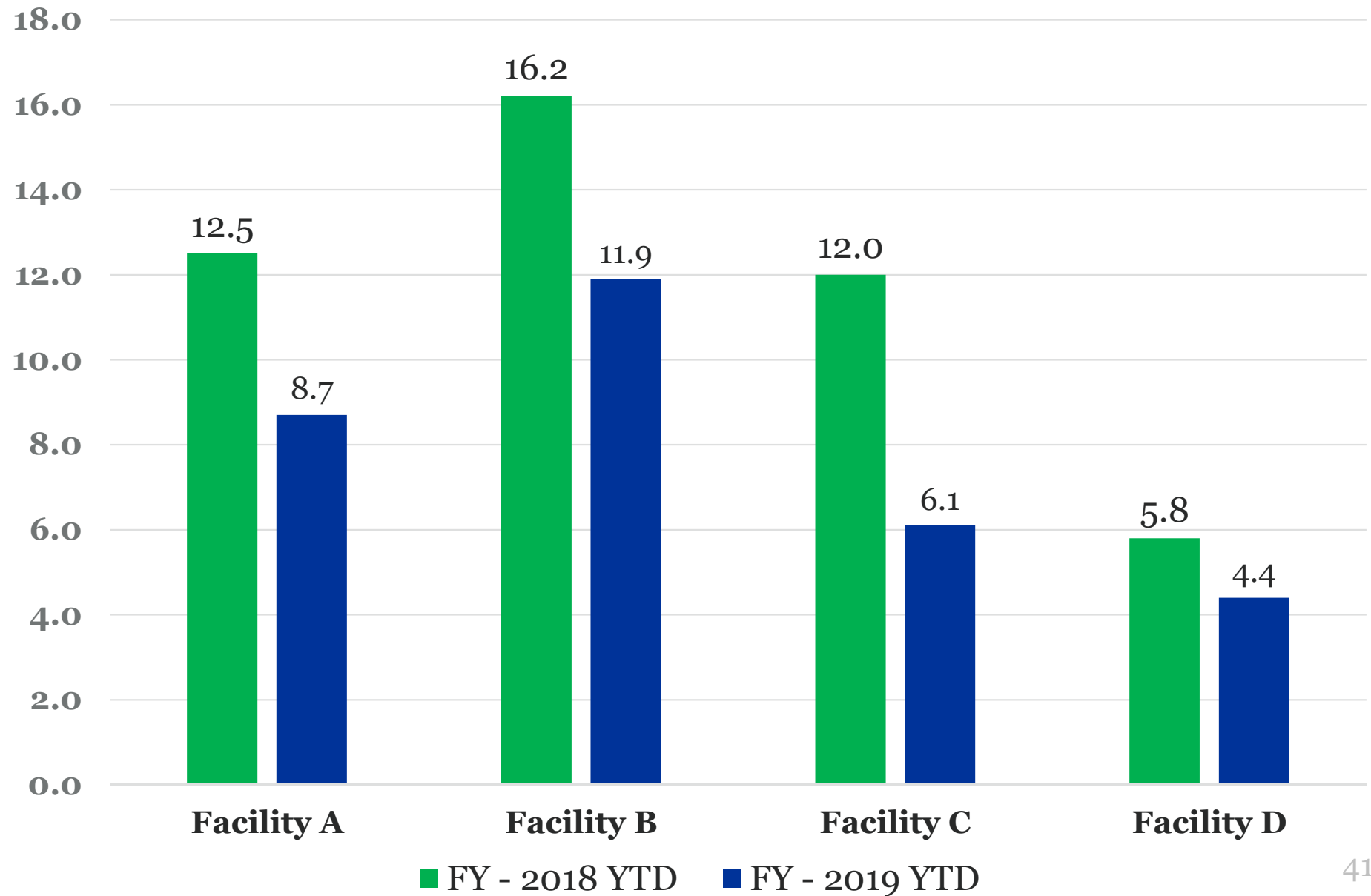
How do PT's demonstrate the value of their services in the onsite realm?



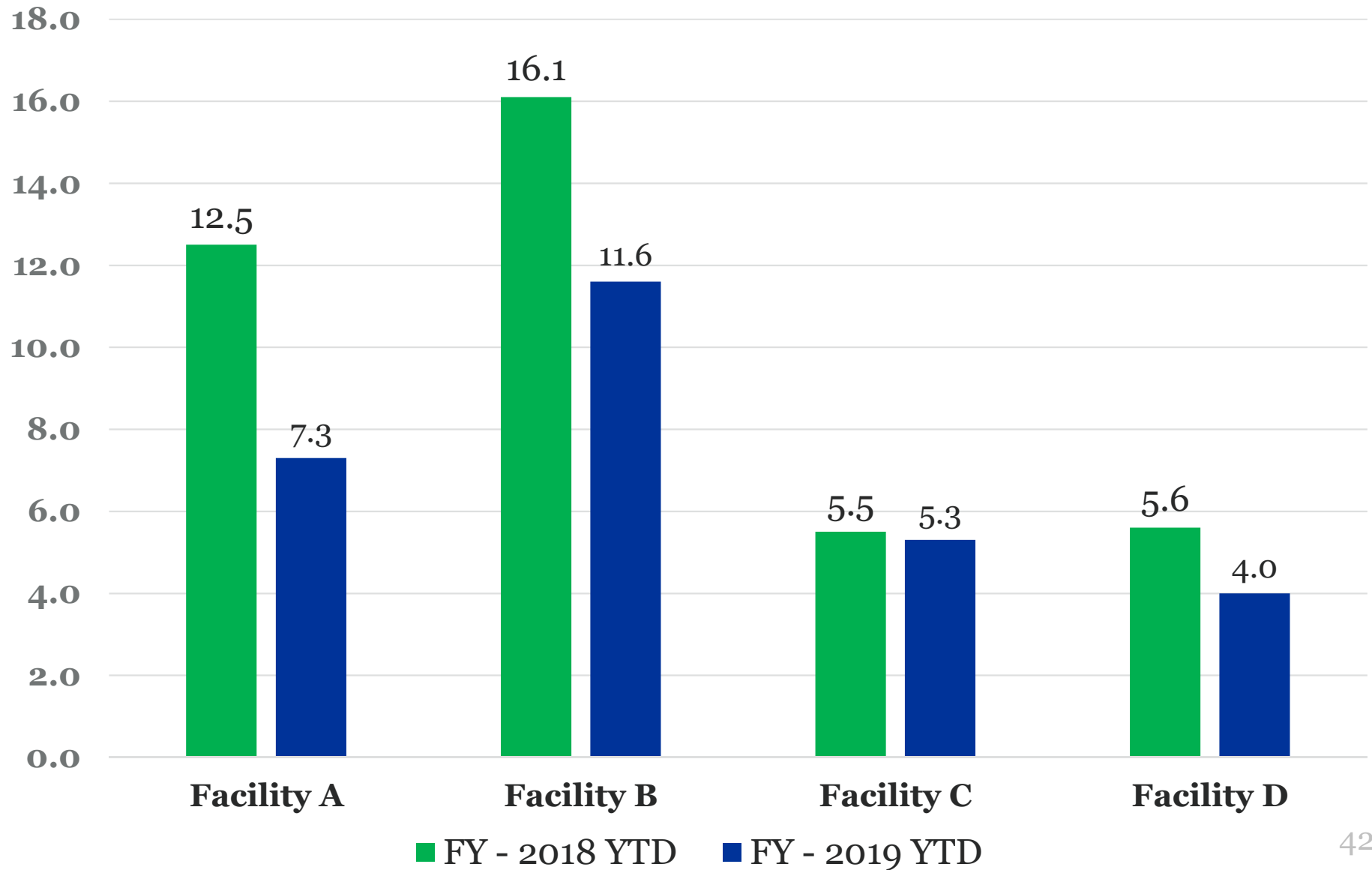
Measuring Program Success



Pre- vs. Post Recordable Rate



Pre- vs. Post DART Rate

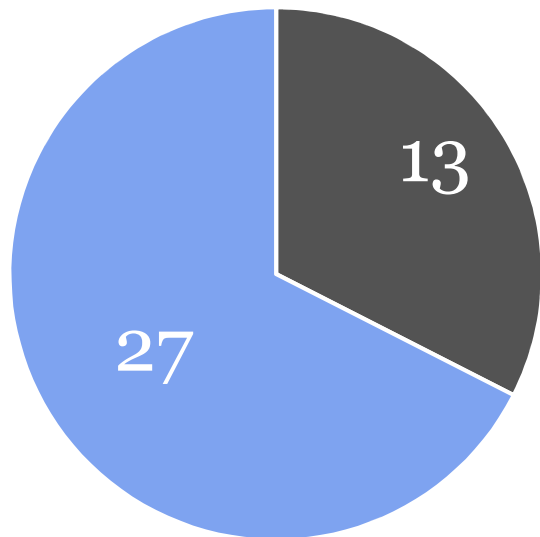


Pre- vs. Post Indemnity Claims



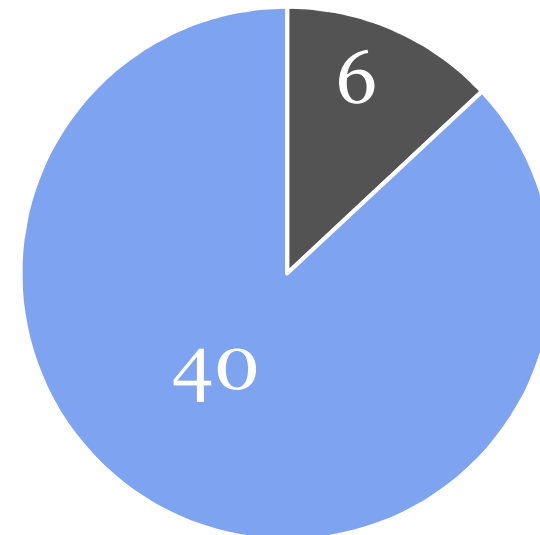
7 Less Indemnity Claims
(Decrease of 54%)

Pre-Program Claims



■ Indemnity ■ Medical Only

Post-Program Claims



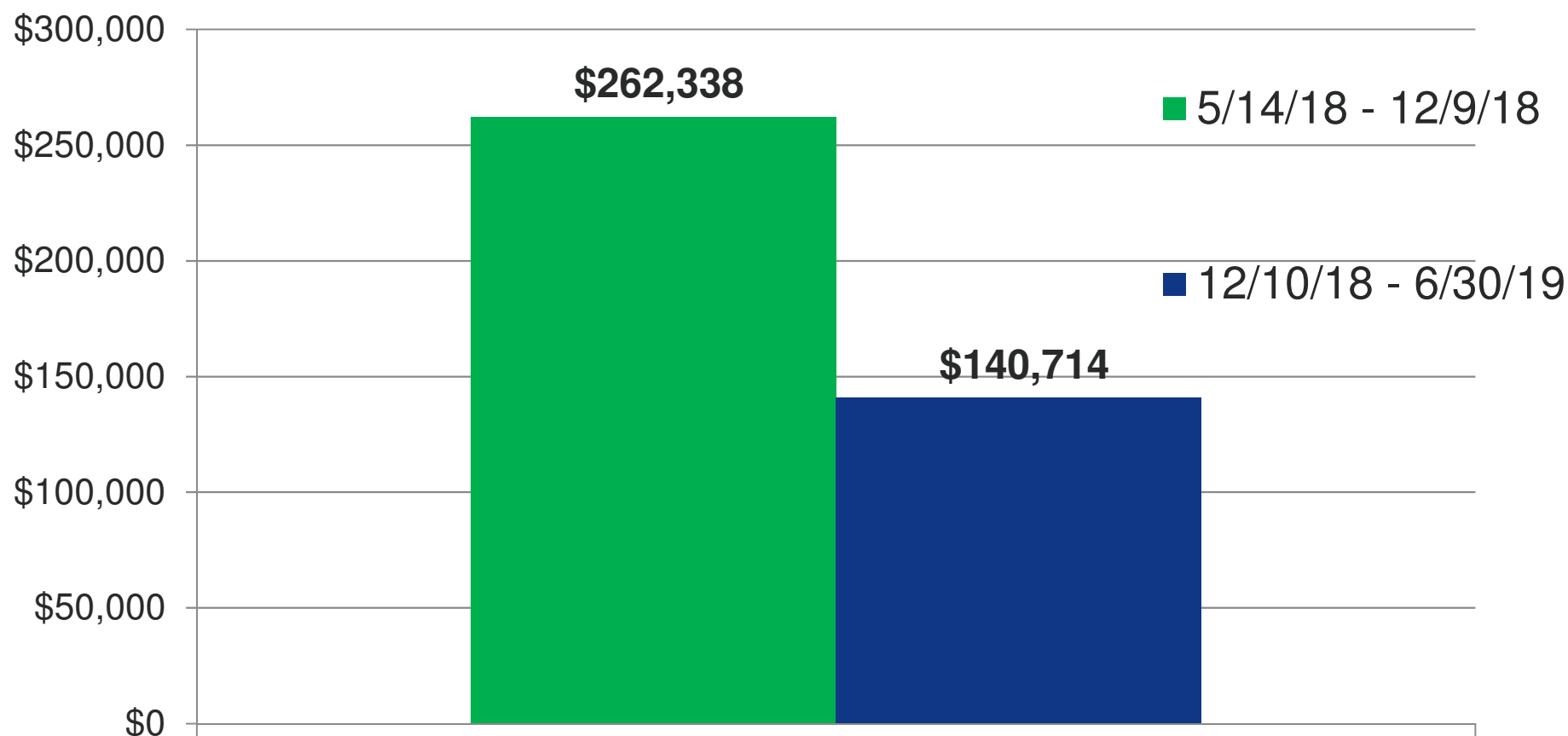
■ Indemnity ■ Medical Only

*NOTE: For this site, the average, 3-year cost of an indemnity claim was **\$18,699**. For medical only claims, it was **\$713**.*

Pre- vs. Post Total \$ Incurred



Onsite 30 weeks: Start: 12/10/18



Est. \$ Incurred for Impactable MSD Claims Pre- vs Post-WorkWell

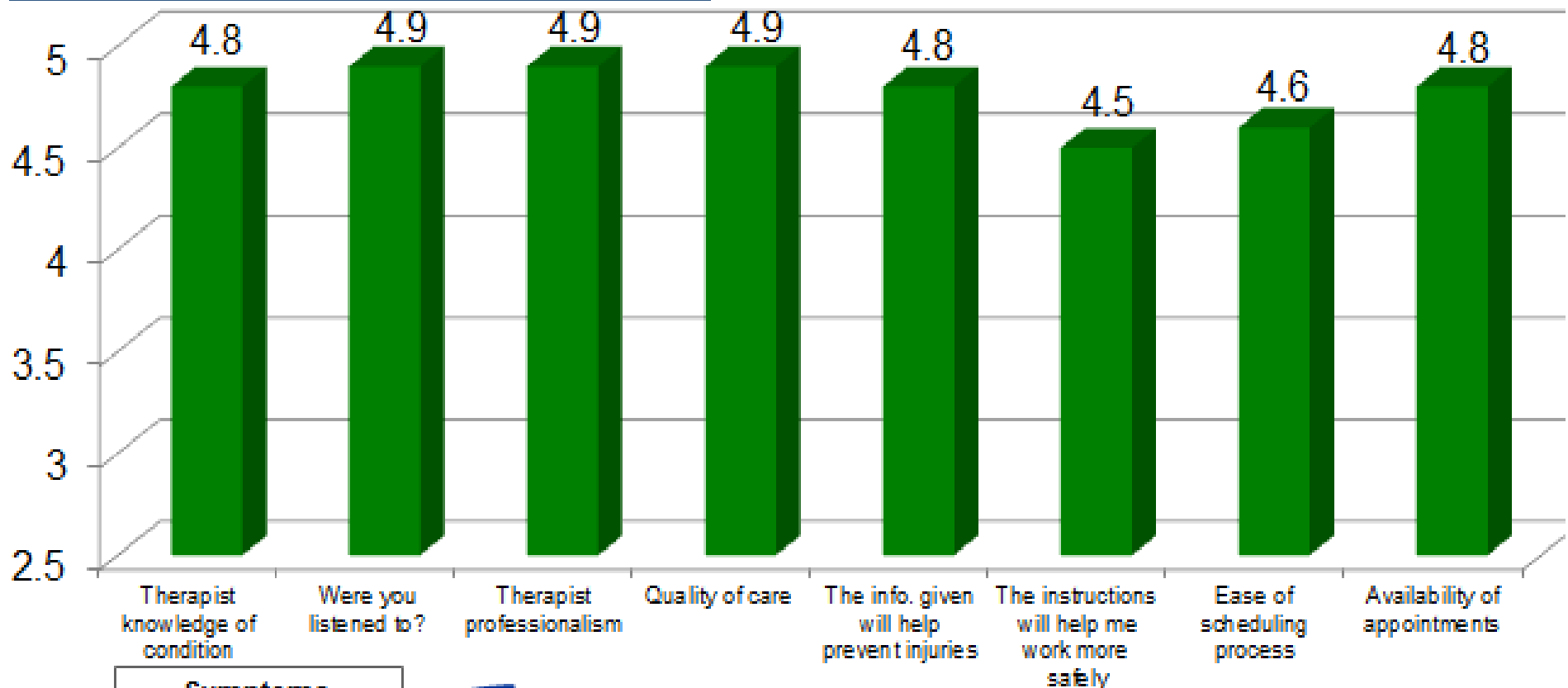
Anonymous Employee Surveys



100% WOULD VISIT THE CLINIC
AGAIN & RECOMMEND IT TO
THEIR COWORKERS*

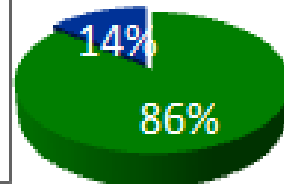
N = 22

1=Poor, 2= Fair, 3= Good,
4=Very Good, 5=Excellent



2

Symptoms
Resolved to
Employee's
Expectations?

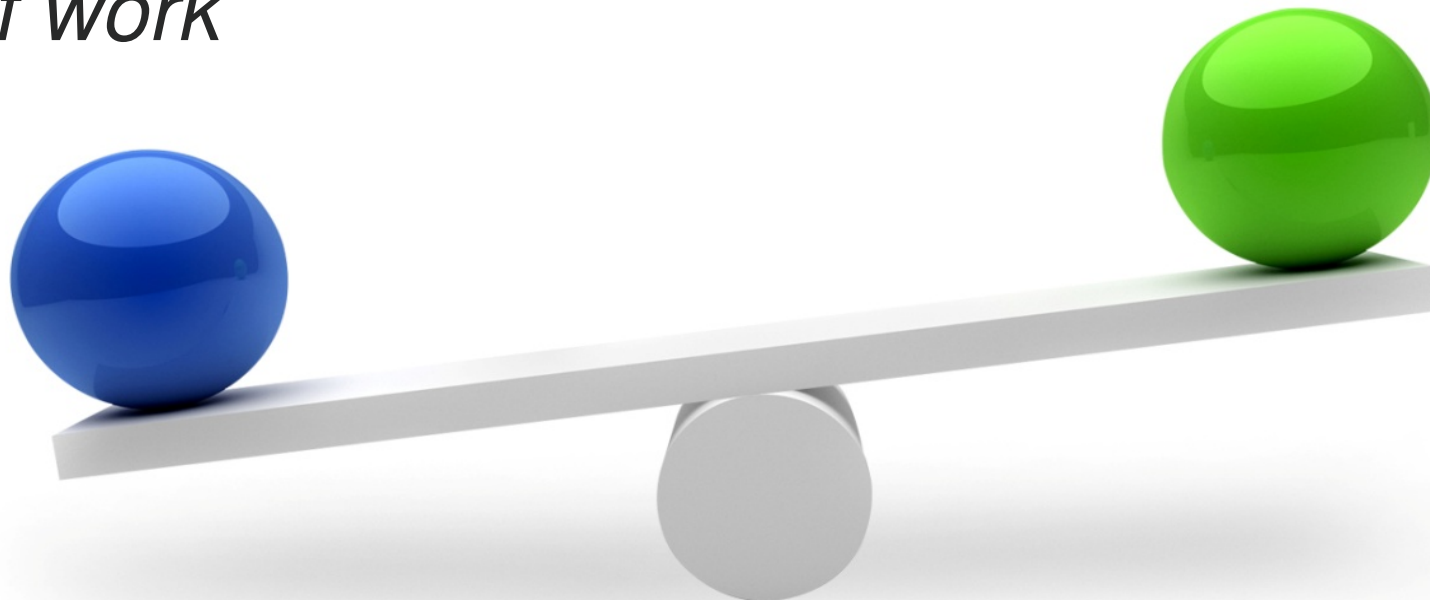


■ Yes
■ Partially

*Results are from 1/01/16 to 8/1/16

The Ultimate Goal

Promoting employee ability to gain or keep the level of physical wellness to meet / exceed the physical demands of both work *and participation in life outside of work*



Final Q&A



WorkWell Headquarters

**11 E. Superior Street, Suite 410
Duluth, MN 55802**

**Jeff Paddock, Director of OnSite Services
Local Office in Kenner, LA
(225) 247 - 4164
jeff.paddock@workwellpc.com**