

How Injury Management Assessments Drive Better Outcomes

Prescription without diagnosis is malpractice in any field or profession. Yet, in the world of workers' compensation and injury management, risk managers are frequently pitched a standard array of solutions before a comprehensive assessment of their current processes, issues and concerns is conducted. As a result, risk managers often end up with a compilation of processes and tools that lack coordination or effectiveness and may even be working against one another.

By FRANK PENNACHIO, senior consultant with [Injury Management Partners](#), a consulting firm that develops products and services that reduce the number, cost and duration of employee injuries

When was the last time you took a step back and assessed the broad spectrum of injury management practices to determine your program's strengths and weaknesses? Without a thorough assessment, how will you know if the next great idea that is being pitched will fit and bring value to your organization? If you don't know where you are going, any path will take you there.

An injury management assessment looks at processes and measurements across a wide range of best practices. For example, it is generally accepted that the prompt reporting of injuries and channeling the injured employee to the best doctor reduces lost time and medical expenses. An assessment of this area would include:

- Do you have a written process for reporting injuries?
- How are new and current employees trained on how to report injuries?
- How are supervisors trained and held accountable for lag-time reporting in their department?
- Is the lag-time reporting benchmarked and moving in the right direction?

An assessment is intended to facilitate a dialog around what is working, what is not and where the bottlenecks are. Once a deficiency or weakness has been diagnosed, then it is much easier and more effective to apply the right prescriptions.

WHEN CONFERENCES ARE BAD

Absent an assessment, attending conferences, seminars and workshops often compounds the problem. Risk managers are presented with a menu of presentations that usually provide some pearls of wisdom.

Yet without first understanding the problem being targeted or the desired improved outcome, risk managers often leave the conference not knowing the best next steps for their company.

In the workers' compensation and injury management arena overall, there is no shortage of solutions offered to employers. Tradeshows, which complement some conferences, are filled to the rafters with vendors offering the same old thing and next great thing.

Tradeshows often resemble the atmosphere of a medieval bazaar. "Step right up, here you are, we have the potion for what ails you."

With the exception of establishing contacts for future conversations, it is difficult to address real needs at a trade show--especially when you are not clear on the needs you want to address.

ONE COST ON TOP OF ANOTHER

Another problem that arises when you select remedies before an assessment is the tendency to stack one costly solution on top of another and still not get to the core problem. In fact, many service offerings mask the underlying problem, so the primary cause of the problem might never be resolved.

For example, you have a nagging feeling that results from your occupational health clinic and doctor could be better. But you have not thoroughly assessed the clinic's practices and its agreements with your company for quality of care and communication. Instead, you go shopping for a fix.

You are offered services such as nurse case management, utilization review, peer review and independent medical exams. You may purchase some or all of these services at extra expense and a debatable return on your investment.

However, the core issue of building a more effective relationship with your injured employee's medical team--or selecting a better doctor--has not been tackled and resolved. The costly fixes distracted you and, in essence, covered up the real issue.

HOW TO ACE ASSESSMENTS

Building and managing better metrics and benchmarks is a key component of assessments. If you are measuring the right things, the numbers will guide you to areas in need of process improvement. A benchmark has little value if it does not indicate where the core problems reside and what processes need your attention.

Going back to our prompt reporting example, if the time between the injury and the report of the injury is growing, then it is time to assess and act. If lost work days are on the rise, then it is time to assess multiple areas and act.

There are many leading indicators of costly injuries that can be measured and managed. But when the smoke alarm goes off, it is too late to take the cookies out of the oven.

Employers of all sizes should assess their injury management practices, but self-insureds and companies with large deductibles and retentions have an additional area to assess. It is critical for them to examine the contractual relationships with professional service providers, such as third-party administrators and managed care organizations. These contracts are the only enforceable mechanisms that can ensure injured employees are getting the best care with cost-efficiency. The terms and execution of these contracts can easily undermine all the best efforts and practices of your injury management program.

Simple ideas and suggestions are frequently the most profound. First, assess. Then seek solutions with a keen eye on the underlying problems.

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