

■ Conclusions drawn from the determining influence of the contextual factors

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Ihre gesetzliche Unfallversicherung

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■ Active rehab management (mechanisms)

- Planning of the rehab procedure in each individual case
- Coordination of specifically chosen measures and service providers
- Dovetailing of the various phases of rehab



■ Active rehab management (summary)

1. Choice of cases when the first information is received
2. Personal contact with the injured person and the doctor treating him at the acute disease hospital, with the following objectives:
 - To determine the extent of the problem
 - To plan the further course of rehabilitation
 - „Tripartite“ agreement on objectives during rehabilitation
3. Follow and continue the rehab plan in agreement with the patient and doctors



■ Exact determination of the extent of the problem

- Precise and validated diagnoses
- Other illnesses affecting rehab
- Treatment and response so far
- Expected results (impairments, disabilities, handicaps)
- Need for equipment and nursing care
- Also problems in the following fields:
 - Family and social situation
 - Employment situation
 - Activities and interests outside work
 - Living conditions

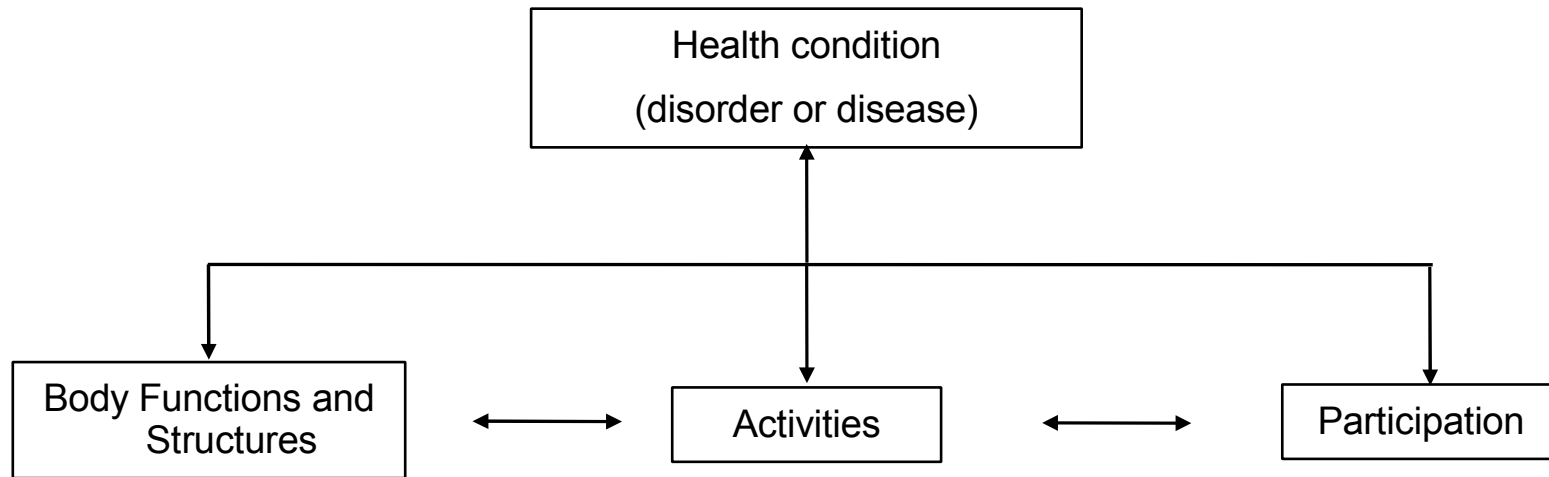


■ Active rehab management (results)

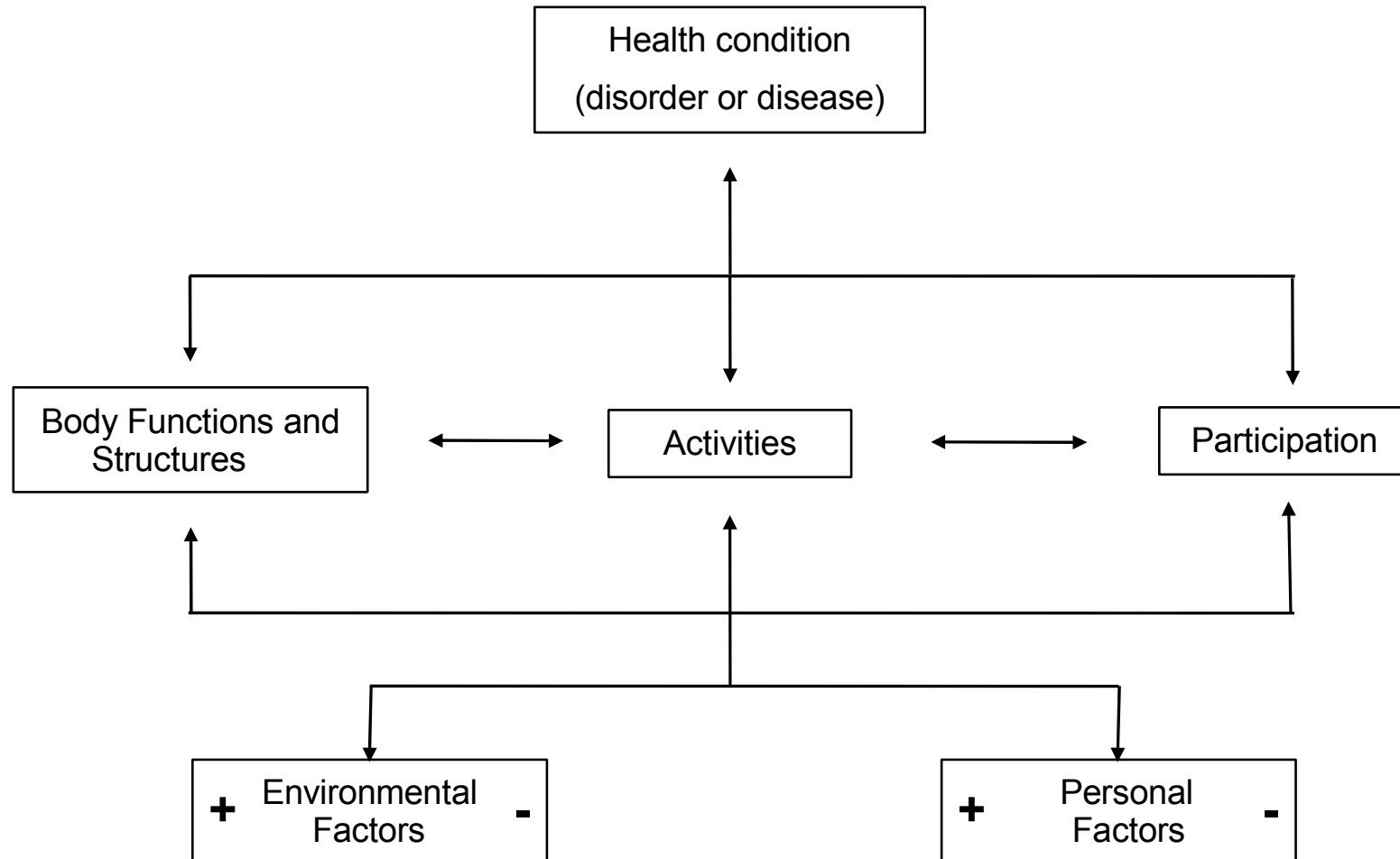
- Reduced treatment costs
- Earlier return to work = lower wage replacement benefits
- Reduced pensions because of better rehab results
- **20 – 30 % saving on costs**



Components of ICF



Components of ICF



■ Consequence



- Identify risk factors and protective factors
- Adjust rehab management to these individually

■ General: the economic and social system as an environmental factor

- Unemployment rate
- Level of material provision in the form of transfer payments



Environmental factors as risk factors

- Conflicts at the workplace
- Mobbing
- Conflicts in the family or partnership
- Nursing cases / sick or problem children in the close personal environment
- Inadequate or inappropriate social support
- The fact that the accident was caused by a third party



■ Personal factors as risk factors (existing before the accident)



- Previous psychological illness or exhaustion symptoms
- Traumatic losses in the person's biography
- An anxious personality structure
- A negative view of oneself / low self-esteem
- Disturbed vocational development, dissatisfaction with one's job
- Existing or imminent unemployment
- Abuse of alcohol, drugs or medicines

■ Personal factors as risk factors (in connection with the accident)

- Traumatic experience of the accident itself
- Existing or imminent unemployment



■ Personal factors as risk factors (in the course of treatment, or later)



- Doctor-hopping
- Pain continuing for longer than three months
- Helplessness inappropriate to the situation
- Increasing demands for treatment, services or payments / development of an attitude that everything should be provided by some authority
- Demands for compensation (pension)

■ Environmental factors as protective factors



- Relatives or friends who give reliable support
- The existence of a job that involves responsibility and offers scope for action
- Interest of the employer in his employee's fate

■ Personal factors as protective factors



- High level of self-efficacy
- Strong sense of coherence
- Positive view of oneself
- Strong interest in vocational or other activity / sense of purpose
- Ability for self-help
- Social competence
- Good socioeconomic status

■ How do you identify the decisive factors?

Personal contact of the rehab manager with the injured person is the key to success!



■ Conversation topics



- What happened in the accident, and how it was experienced?
- The patient's career to date
- Nature and environment of the job held at the time of the accident and the patient's identification with it
- The immediate social environment / background to the patient's life
- Mental and physical health apart from the accident
- Situation in respect of pain, and how pain is coped with
- Success in overcoming previous problems and challenges, and how they were dealt with

■ Helpful questions (1)



- How serious was the accident as you see it?
- How is your company getting on without you? How is your work going on without you?
- How is your family dealing with the situation?
- Are you able to think about the time after your stay in hospital?
- How long do you think it will be before you are fit for work again?

■ Helpful questions (2)



- How well have you managed to handle major changes in your life in the past?
- Who or what helped you to cope with them?
- Who gives you support in difficult situations?
- How important is it to you always to perform well?
- What do you do in your leisure time?

■ Helpful questions (3)



- What issues and problems concern you most at present?
- What do you think should be the next step towards regaining your health / participation?
- What do you need help in doing?
- How do you spend your day?

■ Forecast



- Achievement of the goal of rehabilitation, (not least) through activity on the part of the patient himself.
- Uncomplicated rehabilitation process to be expected.
- Long and difficult rehabilitation process to be expected.
- No rehabilitation to be expected

■ Additional points



- Personal contact with the employer
- Visit to the injured person in his/her personal surroundings
- Modified screening in trivial and moderately severe cases

■ **Effects on rehab management (1)**

- Make it quite plain that responsibility for achieving the goal of rehabilitation lies with the injured person himself
- Activate the patient by setting concrete objectives and regularly checking that they are achieved
- From the start, give clear orientation concerning the goals of the rehabilitation process and the individual services and activate the patient by agreeing on objectives directed towards his return to work
- If negative effects of the risk factors on the rehab process become apparent, confront the injured person with these in a suitable manner

■ **Effects on rehab management (2)**

- Ask providers of medical services to submit a precise appraisal of all the areas of health that are impaired and may prove an obstacle to rehabilitation by using assessment instruments
- In cooperation with the other competent social insurance bodies, give priority to solving health problems unconnected with the accident which may impair the success of subsequent rehab measures
- Make it plain that the obligation of the insurance institution to make payments as a result of the accident does not mean it is responsible for solving all the problems in the injured person's life

■ **Effects on rehab management (3)**

- Eliminate disruptive factors from the patient's personal environment by choosing suitable forms of treatment
- Make full use of the injured person's protective factors and salutogenetic resources
- Start pain therapy and simultaneous treatment of the psychological results of the accident in good time
- Stop treatment early if it proves useless
- Stop medical treatment in good time if the physical or psychic symptoms are not (or are no longer) due to the accident

■ **Effects on rehab management (4)**

- Stop any further efforts towards rehabilitation if it is certain that the patient does not intend to return to work
- Motivate the previous employer to re-integrate the injured person by analyzing the concrete requirements of the company and offering assistance in finding and implementing a suitable solution
- Lead the patient back into the world of work early by trying out his fitness and ability to cope with stress or by gradual re-integration

■ **Effects on rehab management (5)**

- Seek to achieve occupational integration chiefly through measures within the company and short-term qualification measures, making use of the knowledge and skills from the job that can no longer be carried out because of the accident

■ Conclusions

- Boost the injured person's motivation
- Set clear limits to the responsibility of the accident insurance institution
- Avoid abortive investments by making a more accurate assessment of the likelihood that rehab measures will be successful

