

Occupational and Environmental Medicine Bulletin

HEALTHY EMPLOYEES, HEALTHY BUSINESS

Contributed by Philbert Chen, MD, Carle Clinic Division of Occupational Medicine



Health and Productivity Management is a new buzzword circulating among employers lately. What does it mean and does it apply to you? We all know a healthy and happy employee is a productive employee. But what about an employee who has diabetes, or is overweight, or depressed? Are they as productive? If not, can you measure the loss in productivity related to the illness? The answer is yes, and surprisingly, if the health issues are addressed, the increase in productivity may far outweigh the actual cost of providing the care.

Lately, employers have struggled to provide health care benefits for their employees. Health care inflation has

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escalated the cost of providing this benefit. HMOs have contained costs for a while, but the cost containment model has reached its limits. In fact, some believe that current trends to push costs further onto employees, will backfire as employees will decide to defer care rather than pay for needed services. This will result in even greater costs down the road, and have an even greater negative impact on productivity. So what’s an employer to do?

First, we can all agree on some common goals. We all want to be in good health, and want our employees to be as healthy as possible. Having our employees take personal responsibility for their health and financial well-being would

also be desirable. And lastly, we need to create a system and infrastructure to achieve the above-stated goals in a fiscally responsible way. Neither we as individuals, employers, or a society can afford unchecked spending in the health care arena indefinitely.

How will this come about? Some innovative and forward thinking employers have taken interesting approaches to this question:

- They have redesigned benefits to encourage and entice better behavior.
- They have eliminated barriers to participation in necessary programs such as waiving co-pays on certain medications.
- They are pushing Health Promotion programs, such as exercise, weight management, stress relief, nutrition counseling, smoking cessation, and making such programs convenient to participate in.
- They are encouraging spouses and families to participate, too. Employers are also rewarding providers of health care with incentives to improve outcomes.

And the results? For employers who truly have integrated Health and Wellness programs, the results are quite impressive. Direct health care costs have decreased in some instances to 17 percent below regional averages. Absenteeism and employee turnover have decreased markedly as well. Productivity metrics have improved, and in the end it is these productivity enhancements that have caught

management’s attention – more so than the direct health care savings. These employers have realized they can offer first-class health care benefits at reduced cost, and still get better clinical outcomes and improved productivity from their employees. These employers are funding ongoing programs with savings realized, and typically are investing \$250 per employee per year to maintain their success.

- According to the Center for Disease Control (CDC), obesity will soon become the leading cause of death in the United States.
- Most employers spend less than 5% of healthcare dollars on prevention, according to CDC data.
- Spending \$250/employee on prevention, could save \$750,000 in direct health care costs, for 1000 employees/year.*

*Facts based on a compilation of survey data

Dr. Chen works with local employers, health plans and physicians to implement the changes necessary for these programs to be successful. He has helped with the development of a Health and Productivity Toolkit offered by the American College of Occupational and Environmental Medicine, which was designed to assist employers in this area.

If your company would like to consider pursuing these initiatives, please contact Stephanie Fadale at (217) 383-8369.



IMMUNIZATIONS: NO LONGER CHILD'S PLAY

Contributed by Thomas Sutter, DO, MPH, Division Head of Carle Clinic Occupational Medicine

Since August is National Immunization Awareness month, now is the time to ensure you have received immunizations for childhood diseases, as well as vaccinations against other diseases, like Hepatitis A and B.

So where to begin? Start with your personal physician; he/she should have your immunization records in your medical file. If your records are unavailable, visit your physician to discuss your medical history. To ensure that you have received all of the necessary immunizations for adults and to view a vaccination schedule, visit <http://www.cdc.gov/nip>.

If your occupation puts you at risk of being exposed to bacteria or other viruses, you may want to consider additional vaccines, in addition to the recommended vaccinations. Carle Clinic's Division of Occupational and Environmental Medicine can help employers make informed decisions regarding these issues. Diseases like Hepatitis A and/or B are real threats to certain populations and should be considered in the circumstances listed below:

Hepatitis A

Who should receive the vaccine?

- Persons who handle food or are in food services
- Persons who could potentially come in contact with raw sewage or contaminated water
- Persons who travel out of the country

Vaccination Schedule: two injections

- Initial injection
- Booster in 6-12 months

The CDC recommends the Hepatitis A vaccine for children older than 1 year.

Hepatitis B

Who should receive the vaccine?

- Persons who have the potential to come in contact with blood or bodily fluids. This population may include healthcare workers, police officers, firefighters, first responders
- Hemodialysis patients

Vaccination schedule: three injections and a titer (test for immunity)

- Initial injection
- Booster in one month
- Second booster in six months from first injection
- Titer at seventh month. If not immune, third booster is given at that time

* If a dose is missed, the series picks up where it left off; there is no need to start over.

The CDC recommends the Hepatitis B vaccine for children under the age of 18.

Information in chart was adapted from the Center for Disease Control's Web site, <http://www.cdc.gov/nip>.

Knowing where you and your employees stand with immunizations guarantees that your workplace is safer and healthier for everyone. Should you require further assistance in determining your or your employees' need for immunizations, please contact Carle Clinic's Division of Occupational and Environmental Services at (217) 383-3077 or visit <http://occmed.carle.com>.

ARE YOU READY FOR A PANDEMIC?

By now, you've likely seen the coverage of the threat of Bird Flu. Some people are in a frenzy to stock up on supplies, while others have the attitude of "I'll deal with it when it gets here." Whatever your perspective, it's best to be prepared by having a plan in place.

To help business owners and managers implement a plan for a pandemic, the Department of Health and Human Services and the Centers for Disease Control have developed a checklist. The following are just a few of the tasks from the checklist:

- Identify a pandemic coordinator and/or team with defined roles and responsibilities for preparedness and response planning
- Identify essential employees and other critical inputs required to maintain business operations
- Plan for the impact of a pandemic on your employees and customers
- Forecast and allow for employee absence during a pandemic due to factors such as personal illness, family member illness and quarantines
- Implement guidelines to modify the frequency and type of face-to-face contact among employees and between employees and customers
- Encourage and track annual influenza vaccination for employees
- Collaborate with federal, state and local public health agencies and/or emergency responders to participate in their planning process

To view the complete checklist, go to <http://www.pandemicflu.gov/plan/businesschecklist.html>. Should an outbreak occur, having a plan in place will help ensure that your business can respond and adapt quickly and efficiently.

DON'T BE A LIGHT DUTY HOSTAGE: A STEP APPROACH TO EARLY RETURN-TO-WORK

Contributed by Barb Wleklinski, MS, CPDM, Carle Clinic Workplace Injury Network Program Manager

Getting an injured employee back to work can be a tough balancing act. Many employers mistakenly believe they have instituted active and aggressive early return-to-work systems. However, upon closer inspection, those companies have unknowingly or unintentionally established a “passive process.” This passive approach yields moderate success with early work return at the risk of lengthy restricted days, morale and labor management problems, along with unmet production or service goals.

The most frequently overlooked aspect of an effective Early Return-To-Work (ERTW) program is the need to establish planned transitions when the person re-enters the work role. The goal of the ERTW process is to gradually readjust to the physical demands of the job while the person is healing. People heal gradually and recover their function incrementally. A good ERTW program should reflect this natural healing and recuperating process. Many companies have “light duty” programs that are nothing more than a “seat of the pants” approach to return to work. This method lends itself to open-ended, static jobs with high ambiguity and low productivity, which can linger on indefinitely.

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However, some companies do not have the capacity to build return-to-work transitions because the workers have to hit the ground running. Likewise, some jobs in distribution, manufacturing or heavy service jobs lack the ability to build transitions from light to medium physical demand levels.

Transitioning people back to work in a safe and timely manner is dependent on achieving a delicate balance between the needs of the worker and the workplace. Placing workers who must return to a physically demanding job without conditioning invites the person to stay out longer in light duty slots or is at increased risk for re-injury when returning to his/her regular job.

Work Conditioning: An Alternative Solution

An alternative technique is to utilize an offsite professional work conditioning program offered by rehabilitation facilities to help build the transitions and progress the person gradually forward to greater physical demand levels.

The goals of work conditioning programs are synonymous with those of ERTW program. Work conditioning refers to intensive therapy offered usually two to four hours a day for three to five days a week. Therapies may involve strengthening, conditioning, work simulation, education regarding injury prevention, and body mechanics training. A job site analysis may also be completed to assist the employer in making appropriate equipment modifications for an employee returning to work after an injury.

How It Works

Often the workplace can offer a half day of productive activities with focus on endurance on the job and a work conditioning program for the other half day. At the same time, the program is documenting the progress (or lack of) to assist physicians in making decisions on physical work abilities. By using this approach, the employer and employee have the best of both worlds. The employer can keep the person connected to the workplace and the rehabilitation professionals can build the program to advance through the sometime painful reconditioning / recovery process. This type of approach can move the person to full productivity sooner than static jobs, which may lead to lengthy light duty assignments just to keep the person on the job.

In the end, ERTW programs have real recovery value. Each case will require an individual approach with close communication between the worker, physician, therapist, and employer. Employers should re-examine their methods for some jobs and invite this dual track approach of restricted work in combination with work conditioning even for a short period of time.

For more information on disability management, please contact Barb Wleklinski at (217) 355-6224 or via e-mail at Barb.Wleklinski@Carle.com. For work conditioning programs through Carle Foundation Hospital, contact Carle Therapy Services at (217) 383-3916.

Questions to ask when evaluating a return-to-work situation:

- Do the physical demands of the job require lifting or high levels of exertion?
- Does the workplace have the opportunity to provide a transitional graduated ERTW plan?

If not, call up the medical provider and discuss alternative options. This dual track approach is often the best method to balance the workers needs and employer needs.

SURVEY SAYS...

The results are in! We sent 1,029 surveys to local businesses in the Champaign, Urbana, Rantoul, Danville and Mattoon areas to see what they thought about Carle Clinic's Occupational Medicine services. Here's what YOU had to say:

- Almost 95 percent said they would recommend Carle Clinic's Occupational Medicine services to other companies.
- More than 88 percent said they were saving money and reducing lost work time by using Carle Clinic's Occupational Medicine services.
- Nearly 76 percent said the prompt scheduling of appointments in the Occupational Medicine department was very good or excellent.
- Almost 83 percent said the courtesy and efficiency of the case coordinators was very good or excellent.
- 75.9 percent said the treatment provided by the medical provider was very good or excellent.

Thanks for sharing your thoughts! Your opinion is valuable; we will use it to continually improve our services. All survey respondents were entered into a drawing to win one of two \$100 Wal-Mart gift cards. Congratulations to our winners:

Mary McGrew of the Champaign Park District and **Bobbie O'Herron** of Ray O'Herron Co., Inc. in Danville.

CHECK US OUT!

[HTTP://OCMED.CARLE.COM](http://occmcd.carle.com)

Get more information about services offered by Carle Clinic's Occupational Medicine on our Web site.

To set up an appointment with Carle Clinic's Occupational Medicine, contact:

Urbana
(217) 383-3077

Rantoul
(217) 893-7710

Danville
(217) 431-7606

Bloomington/Normal
(309) 664-330

GOT EMAIL?

If you would like to receive information via e-mail, send your e-mail address to Liezl.Bowman@Carle.com.



*Carle Clinic's Division of Occupational Medicine
and the Workplace Injury Network (WIN) Program presents:*

UNLOCKING THE SECRETS OF HEALTH AND PRODUCTIVITY IN THE WORKPLACE

**Wednesday, October 25, 2006 • The Forum at Carle • Pollard Auditorium
8am-4pm • Continental breakfast starting at 7:30am**

The Boomer Workforce: Health and Productivity Connections for Productive Aging

Keynote Speaker: Kenneth Mitchell, PhD, Vice President Health and Productivity
UnumProvident

Luncheon and Panel of Experts Discussion and Q&A

Health and Productivity in the Workforce: Realities and Opportunities

"Why Isn't This Employee Back to Work?":

How Undiagnosed Psychological Concerns Influence Physical Outcomes

Speaker: Pamela Warren, PhD, Licensed Clinical Psychologist
Carle Clinic Association

"Healthy Employees, Healthy Business"

Speaker: Robert Scully, MD, Chief Medical Officer
Health Alliance Medical Plans

Who should attend?

Everyone is welcome to this complimentary seminar, but Senior Administration, Owners, Chief Financial Officers, Plant Managers, Human Resource Managers, Occupational Health Nurses, Safety Managers, Case Managers, Insurance Carriers/TPA's, Risk Managers, and Attorneys will find this seminar particularly useful and informative.

For more information, please contact Barb Wleklinski (217) 355-6224. Seating is limited, so registration is required. To pre-register, send an email to Stephanie.Fadale@Carle.com with "seminar" on the subject line, along with your name, title, company and phone number. We hope to see you there!