



# Workers compensation

Work related problems are an important and common aspect of Australian general practice, managed in 1.4 per cent of all encounters. Most commonly, these comprise musculoskeletal disorders (mainly back), psychological problems, and skin conditions. Workers compensation provides a safety net for workers injured in the course of their employment. The GPs role in managing work-related problems is defined by state-based workers compensation legislation, and there are certain obligations that must be met. The primary objective is to assist the patient's recovery and early return to work. The GP's role also includes promoting the health benefits of good work to their patients. Workers compensation is a common source of anxiety for GP registrars, and it is therefore a critical area for GP supervisors to cover with them.

<b>TEACHING AND LEARNING AREAS</b> 	<ul style="list-style-type: none"> <li>• The workers compensation system in your state and <a href="#">Comcare</a></li> <li>• Role of the nominated treating doctor</li> <li>• Appropriate documentation of the workers compensation consultation</li> <li>• Completion of a certificate of capacity and a medical report</li> <li>• <a href="#">The flags model for workers compensation</a></li> <li>• Billing processes for workers compensation cases</li> <li>• Role of key players in returning the injured worker to work - worker, employer (RTW coordinator), insurer (claims/case manager), vocational rehab providers</li> <li>• Local industrial and agricultural activity, where relevant</li> </ul>						
<b>PRE- SESSION ACTIVITIES</b>	<ul style="list-style-type: none"> <li>• Watch the video <a href="#">The Doctor's Role and Workers Compensation (NSW AMA)</a></li> </ul>						
<b>TEACHING TIPS AND TRAPS</b> 	<ul style="list-style-type: none"> <li>• Perform a comprehensive initial history and examination, and make a provisional diagnosis</li> <li>• Document everything fully, as records may be the subject of legal proceedings</li> <li>• Explore and clearly document the specific mechanism of injury</li> <li>• Don't rush into imaging in the absence of red flags</li> <li>• Psychological distress is common and needs to be well-managed</li> <li>• Involve a vocational rehabilitation provider early</li> <li>• Effective management involves knowing the worker's role and duties</li> <li>• Don't assume that there is no capacity for work - it's not the GPs job to suggest specific work tasks, but to advise on restrictions</li> <li>• Consider both physical and psychological functioning and focus on what the person can do, not what they can't do</li> <li>• Where possible, give the patient a time frame for their return to work</li> <li>• Establish positive recovery expectations early in the patient's care</li> <li>• Effective return to work relies on good communication and cooperation between stakeholders</li> </ul>						
<b>RESOURCES</b> 	<table border="1"> <tbody> <tr> <td data-bbox="279 1653 391 1892"><b>Read</b></td> <td data-bbox="391 1653 1519 1892"> <ul style="list-style-type: none"> <li>• RACGP Guideline <a href="#">Diagnosis and management of work-related mental health conditions in general practice</a></li> <li>• RACGP resource – <a href="#">Principles on the role of the GP in supporting work participation</a></li> <li>• AFP article (2013) – <a href="#">Work related encounters in general practice</a></li> <li>• AFP Article (2013) – <a href="#">Returning to work after an injury</a></li> <li>• Comcare – <a href="#">A guide for GPs to manage work related injury</a></li> <li>• Comcare – <a href="#">Psychological Assessment: Assessing a patient's capacity for work</a></li> </ul> </td> </tr> <tr> <td data-bbox="279 1892 391 1971"><b>Watch</b></td> <td data-bbox="391 1892 1519 1971"> <ul style="list-style-type: none"> <li>• <a href="#">Watch the video for Nominated Treating Doctors (NSW WorkCover)</a></li> <li>• <a href="#">2022 MHPN webinar Assessing functional capacity to work for psychological injuries</a></li> </ul> </td> </tr> <tr> <td data-bbox="279 1971 391 2027"><b>Listen</b></td> <td data-bbox="391 1971 1519 2027"> <ul style="list-style-type: none"> <li>• AFP Podcast – <a href="#">Returning to work after an injury</a></li> </ul> </td> </tr> </tbody> </table>	<b>Read</b>	<ul style="list-style-type: none"> <li>• RACGP Guideline <a href="#">Diagnosis and management of work-related mental health conditions in general practice</a></li> <li>• RACGP resource – <a href="#">Principles on the role of the GP in supporting work participation</a></li> <li>• AFP article (2013) – <a href="#">Work related encounters in general practice</a></li> <li>• AFP Article (2013) – <a href="#">Returning to work after an injury</a></li> <li>• Comcare – <a href="#">A guide for GPs to manage work related injury</a></li> <li>• Comcare – <a href="#">Psychological Assessment: Assessing a patient's capacity for work</a></li> </ul>	<b>Watch</b>	<ul style="list-style-type: none"> <li>• <a href="#">Watch the video for Nominated Treating Doctors (NSW WorkCover)</a></li> <li>• <a href="#">2022 MHPN webinar Assessing functional capacity to work for psychological injuries</a></li> </ul>	<b>Listen</b>	<ul style="list-style-type: none"> <li>• AFP Podcast – <a href="#">Returning to work after an injury</a></li> </ul>
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<b>FOLLOW UP/ EXTENSION ACTIVITIES</b>	<ul style="list-style-type: none"> <li>• GP registrar to arrange for a vocational rehab provider to speak to the practice</li> <li>• Visit local industrial and agricultural work sites</li> <li>• Role play the practice clinical reasoning challenge</li> <li>• Review Comcare web page for <a href="#">Medical practitioners</a></li> </ul>						

# Workers compensation

## Clinical Reasoning Challenge

### INSTRUCTIONS FOR SUPERVISOR

You are Glenn, a 27-year-old mechanic from a local garage. You are presenting with back pain from an injury at work the previous day. You have not been to the practice before. "I have hurt my back at work and the pain is killing me"

#### Story

- You are a mechanic at a local garage
- Yesterday afternoon about 3pm you were carrying part of a truck engine (weighing about 15kg) and stumbled as you went to put it on a bench. You did not fall or drop it. You immediately felt a sudden sharp grabbing pain in your lower back, but it wasn't too bad and managed to keep working until the end of the day.
- The pain gradually became worse over the evening and night and you struggled to sleep with it
- The pain is 'aching' in character, and located in the lower back with some radiation to the buttocks
- It is now very severe and limiting your movement significantly
- You have had occasional back pain on and off over the years, but nothing nearly as bad as this
- There are no neurological symptoms
- There are no red flags
- You have taken Panadol and Nurofen but the pain is still very bad
- You have no significant medical problems
- You don't take any medications
- You don't smoke or drink much
- You have no allergies
- You are married with no children
- When the registrar mentions workers compensation, you say the boss 'won't be keen'. If explored, you reveal that you feel very unsupported at work and at times bullied by management.
- You are reluctant to go down the 'compo' route as you feel like it will make things worse between you and the boss
- You ask about alternate options other than proceeding with workers compensation, but can be convinced that it is the appropriate action
- You have non-specific low back pain related to a work injury.

The GP registrar is expected to elicit the important aspects of history, both clinical and work-related (in this case an unsupportive work environment).

When asked about examination findings, you can state that examination of the lumbar spine shows:

- Reduced ROM in all directions
- Tenderness++ over lower lumbar spine and paravertebral muscles with muscle spasm++
- Neurological examination normal
- SLR 70 degrees bilat

The remainder of the examination is normal.

#### Assess

- Communication skills

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- History taking – mechanism of the injury, work duties, work environment, flags

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- Problem definition – mechanical low back pain as provisional diagnosis, explanation of problem, no indication for imaging

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- Management – analgesia, NSAIDs, physio, time off work

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- Follow-up and safety netting – early review

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APPROVED  
WORK INJURY  
CLAIM

# Workers compensation

## Clinical Reasoning Challenge

### INSTRUCTIONS FOR REGISTRAR

Your next patient is Glenn, a 27-year-old man who has never attended your practice.

- Take an appropriate history
- Request the results of the physical examination
- Outline your diagnostic impressions and
- Discuss your initial management plan.

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