



TOCDF MEDICAL CLINIC ABSENCE / DISABILITY MANAGEMENT PROGRAM



- Tooele Chemical Agent Disposal Facility (TOCDF)
 - First chemical weapons destruction facility in U.S.
 - Plan and implement the destruction of chemical weapons and secondary waste that is safe, secure and environmentally compliant for workers and the public

- TOCDF MEDICAL CLINIC
 - Staffing
 - Two physicians
 - Four Physician Assistants
 - Twenty F/T paramedics
 - Occupational Health Nurse
 - Laboratory Technician
 - Support personnel

- TOCDF DEMILITARIZATION SUPPORT
 - Surveillance examinations
 - Annual physical examinations
 - Response to agent and non-agent emergencies

- **TOCDF MEDICAL CLINIC MISSION:**
 - To effectively and efficiently manage employee injury/illness, regardless of circumstance, to contain costs, enhance productivity and support the safety and well-being of each employee

- EMPLOYEE RESPONSIBILITY TO ABSENCE/DISABILITY MANAGEMENT
 - Expected to report all work and non-work related illness or injury to immediate supervisor and to medical clinic in a timely fashion

- **MANAGERS AND SUPERVISORS**

- Document work-related injury or illness on Accident /Injury Report form
- Participate in CMG “Fitness for Duty” meetings to review employee status
- Follow-through with employee “Return to Work” plan

- MEDICAL DEPARTMENT COMPONENT

- Evaluates and treats all work-related injuries or illness
- Evaluates and provides emergent care for work and non-work related injuries/illness
- Inquires of all injured/ill patients of work or non-work relatedness
- Clinicians consult with Medical Director regarding treatment options
- Determines work status based on specific job requirements and on outside consultant recommendations
- Communicates work status to employee's supervisor and to Safety Manager

- CASE MANAGEMENT GROUP (CRG)
 - Convened by Medical Director or Occupational Health Nurse (OHN)
 - Comprised of the following key personnel:
 - OHN
 - Medical Director
 - Safety Manager
 - Human Resources
 - Employer Worker's Compensation Provider
 - Off-site clinicians
 - Other personnel as required

- **CMG RESPONSIBILITIES**

- Determine appropriateness and necessity for outside medical consultation
- Facilitates required care for injured/ill employees
- Communicates to on-site departments regarding employee's fitness for duty, work limitations and work modification requirements

•CMG RESPONSE

- Involvement commences at the time of incident reporting or prior to planned leave
- CMG notification is expected to occur in a timely manner following initial treatment
- Conducts thorough and objective assessment of patient's current status
- Assesses immediate case management needs and develops plan forward

- **CASE MANAGEMENT ACTIVITIES**

- Coordination of a plan forward with the Worker's Compensation provider
- Communicates the plan forward with patient and immediate supervisor
- Provides appropriate education to the patient
- Identifies community resources and referrals
- Facilitate communication between management and patient

- CASE MANAGEMENT ACTIVITIES CONT.
 - Evaluates and monitors process components
 - Monitors treatment of internal/external providers
 - Documents patient assessments and needs, plan forward, actions completed and current patient status in the medical record

- CASES MANAGED

- Injury/illness is work-related and OSHA recordable
- Injury/illness is work-related and a first aid case that may evolve to an OSHA recordable case
- Injury/illness is non-work related, but impacts assigned work duties
- Injury/illness that results in time away from work
- Pre-existing injury/illness that is or could be aggravated by work duties
- Functional Capacity evaluations are needed

- PATIENT INJURY RECOVERY PLAN
 - Referral to Outside Healthcare Provider
 - Work site evaluation
 - Ergonomic evaluation
 - Follow-up and subsequent treatment by TOCDF clinicians

- RETURN TO WORK PLAN

- Coordinated with Human Resources and the patient
- Development of modified duty program as required
- Communicated to case participants

- PATIENT CONFIDENTIALITY

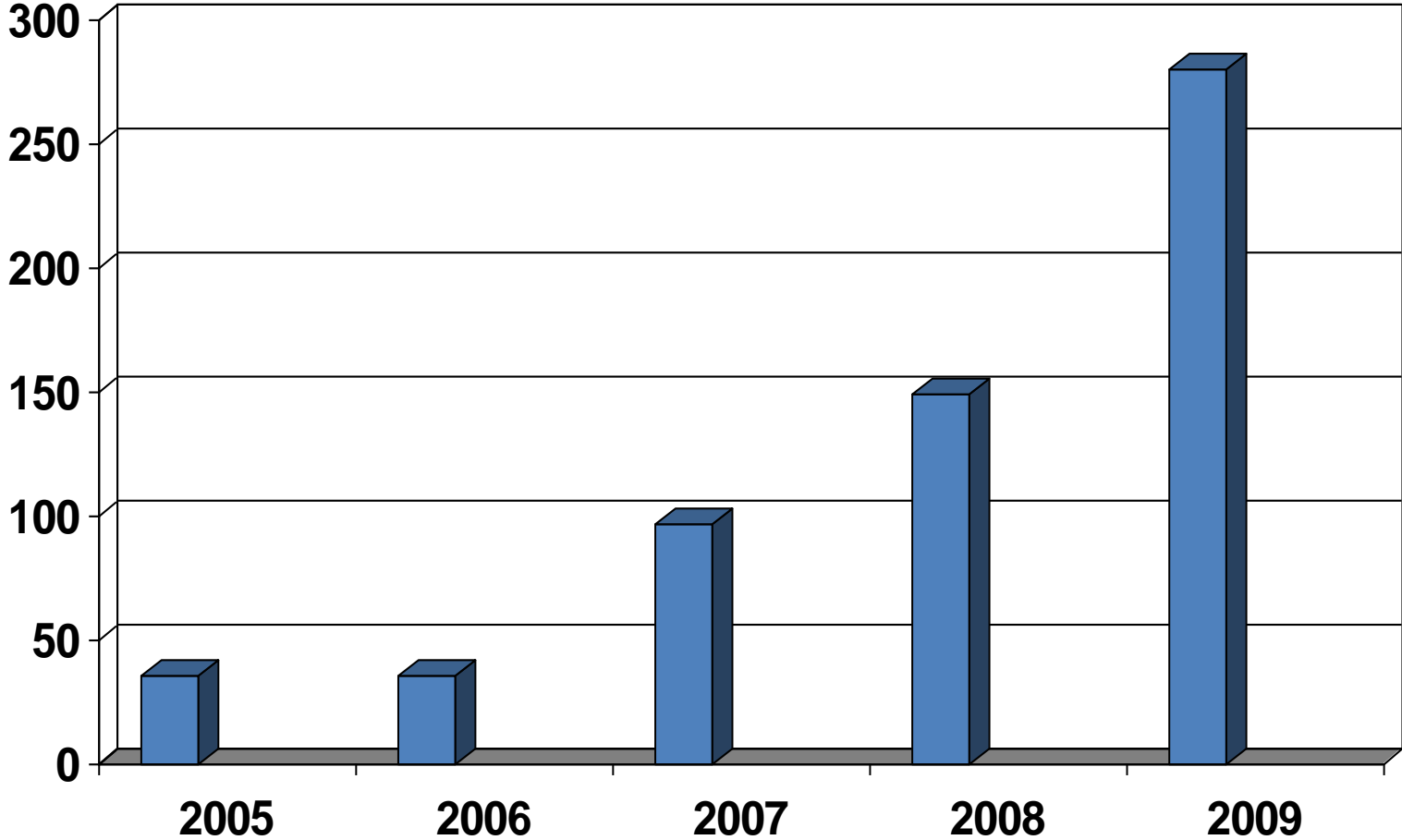
- Case management records are maintained and safeguarded with established codes of ethics
- Comply with legal or regulatory requirements to assure confidentiality of health information

- CASE MANAGEMENT EXPANSION
 - Thirty-six cases opened in 2005 and in 2006
 - Ninety-seven and 149 cases opened in 2007 and 2008 respectively
 - Two hundred eighty cases reported in 2009
 - Increase attributed in part to the addition of the following:
 - Sub-contractors
 - Long-term disability personnel

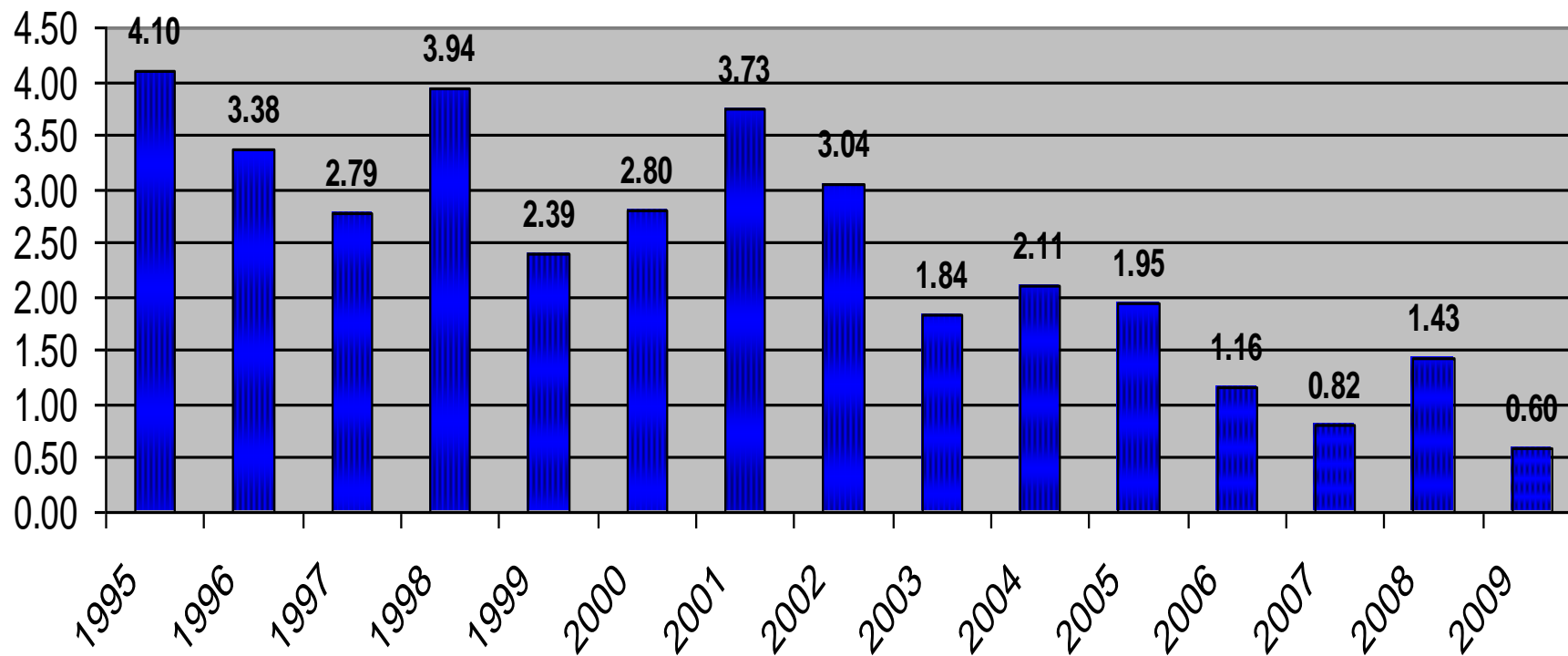
•SUMMARY

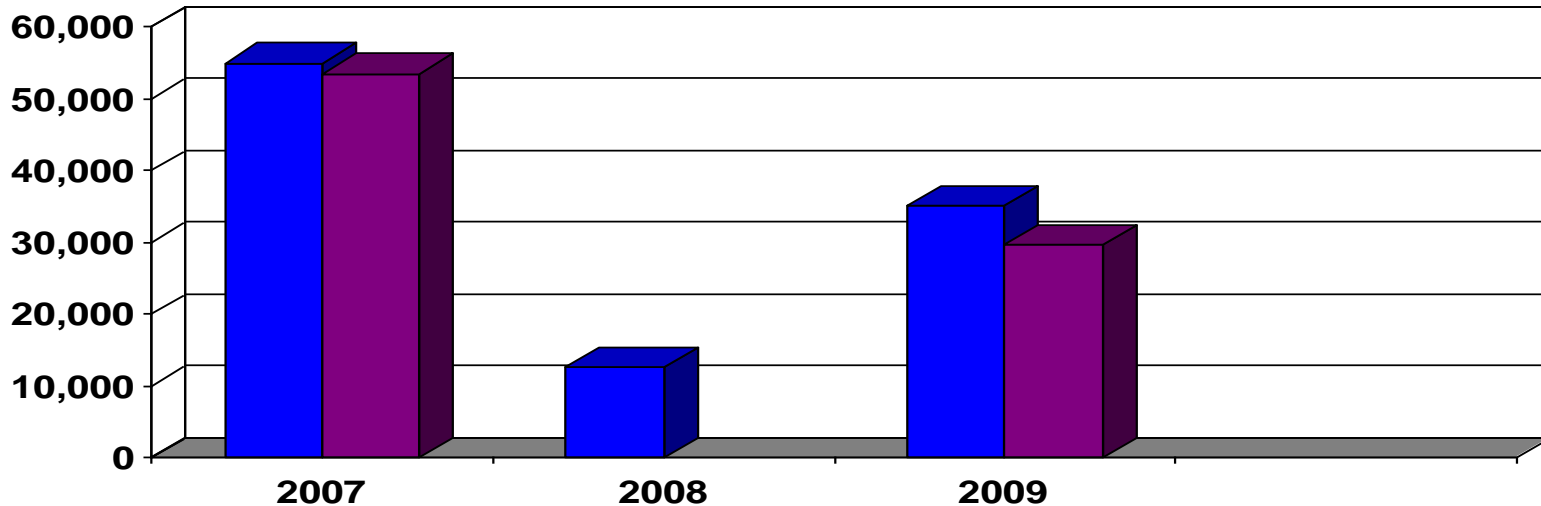
- Efficient employee case management and the “Return to Work” process have contributed to effective cost management, enhanced productivity and employee safety / well-being
- Contributors to successful management of employee illness/injury
 - Early CMG intervention
 - Improved communication
 - Increased oversight of sub-contractor work and non-work claims

MANAGED TOCDF INJURY / ILLNESS CASES



OSHA Recordable Injury/ Illness Rate 1995-2009 YTD





WORKER'S COMPENSATION EXPENDITURES

- One case in each of 2007 and 2009 presented a substantial portion of the total expenditure for each year (\$53,464 and \$29,590 respectively)
- Forty-seven cases from 2007-2009 were treated at the TOCDF Medical Clinic and did not incur additional expense
- All cases resulted in no lost work days. As of 5 March 2010, TOCDF worked 9,000,000 man hours without a lost work day