

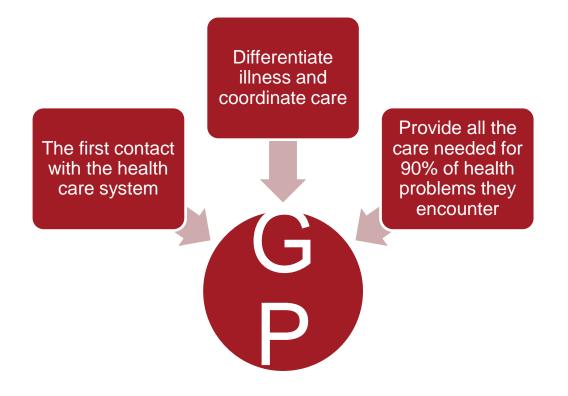
Marcia Vernon, Director Health and Return to Work Services. 23 October 2015

## Agenda

- Understanding the GP profile
- What GPs say
- The real problem
- A fresh approach
- What's in it for you



## The Doctor profile





Smaller practices with local decision making



Corporate chains with centralised decision making







#### Complete 10-15 years training



Provide care for all ages, genders, and across all disease categories



Work both in isolation and as part of a team



# 88% of people rate doctors as ethical and honest





83% of Australians consult a GP at least once per year



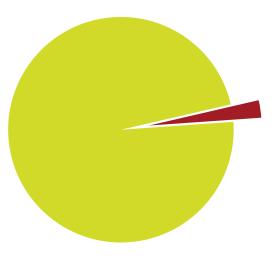
116 million General Practice services were delivered in 2009-10



work-related problems account for only 2.5 out of 100 general practice encounters



#### **GP Encounters**



OtherWork related



#### What Doctors tell us

- "I think I went to a one-hour tutorial about WorkCover when I was at Uni... that's all we ever got..." Northern suburbs GP
- "I don't let my junior doctors see WorkCover patients... it's too complex, it's not fair on them" Clinical lead GP, Northern suburbs
- I trained in the UK, we don't have a system like this there" GP Registrar, Northern Suburbs

#### What Doctors tell us (cont)

- "the patients see me as their advocate, I've known some of them since they were kids... I know their families... they expect me to support them no matter what" Gawler GP
- "There's so much paperwork, red-tape and communication with everyone but the patient it seems, it all takes time" Northern Suburbs GP



#### What Doctors tell us (Cont)

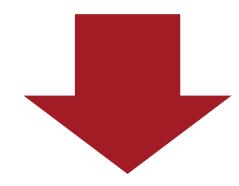
"you have never really been clear about what you expect from GPs, and what is our role, a model of care for work injury would be helpful" Adelaide GP



#### The real problem



High influence, High expectations placed on Doctors



Potentially, **IOW** knowledge and **IOW** confidence in managing patients with a work injury



#### We're taken a fresh approach to the problem





## What we're trying to achieve

Doctors are **engaged** with the Return to Work scheme

Doctors feel **respected** for their expertise and

Doctors are **Supported** to achieve the **best possible outcomes** for patients with a work injury



## How we're achieving it

Means of influencing and educating doctors:

- Informal
- Semi formal
- Point-Of-Sale
- Through others



## **Dr Gavin Shepherd**

Occupational and Environmental Physician, Medical Advisor ReturnToWorkSA

#### **Medical Advisor**



**Dr Gavin Shepherd** Occupational and Environmental Physician

- Current outcomes in SA

   latrogenic disability
- Certification of incapacity and the implications
- Certification vs prescription
- Practical advice on how to apply the health benefits of work into clinical practice:

   Unfit and fit on a single certificate
   The new certificate as a tool to
  - reinforce capacity



#### New Work Capacity Certificate

			E. Functionalability	i
	ReturntoWorkSA	13 18 55	E. Functionalability	i
	Work Capacity Certificate	0	Your a bill ty to work is affected by this injury(\$/condition(\$) as follows: (pleasedest applicable incline - blank felds indcate the limitations dont apply. Please indude any impact of medications on function)	
C. Certification		i da se	No restrictions Physical function On With modificators On ments (eg. datals of opporty or line is constructed association of earlies On the original of the or	bleduše)
In my opinion, you: (please tick whichever apply) have recovered from your injury/condition and are fit to return to your normal duties and hours on: some further treatment may be required ale fit to perform suitable duties that accommodate your functional abilities from: to are medically unfit to undertale suitable duties while recovering from your injury for the period: to are medically unfit to undertale suitable duties while recovering from your injury for the period: Reason: Lestimate you should have functional capacity to return towork in days weeks OR uncertain at this stage (estimated imeframewill essist withplanning for eturn to selework) I would life to review your progresson: comments:		String:       O         Sanding/walking:       O         Kneeling/squatting:       O         Carrying/holding/lifting:       O         Reaching above shoulder:       O         Bending:       O         Use of affected body part:       O         Neck move ment:       O         Clim bing: steps/stains/ladders:       O         Driving:       O         Mental health function       Hots like bid refully like ted         After thon/concentration:       O         Judgement (ability to make decisions):       O         Other functional considerations - not listed above (please provide details in comments section)       Image: Status in comments section		
			I have pescribed medication(\$ that could impact uponyour ability to undertake some activities.	
	Reacon I testimate you sho tid have functional capacity to extern towork in days (etimate timefunewait aust which enough a raise advected) I would like to extern your pergression: or at your next medical co Connects Connects		Details: L IRCOMMENT. L IRCOMME	
<b>—</b>	D. Treatment plan The following treatment plan is almed at assisting your recovery and return to work Their referred you for the following clinical treatment: Medical specialist (Name & speciality) Polychologist (Name) Playchologist (Name)		G. Doctor's details Doctr's anne: Addess Fac: Fac: Signed: Competition date:	

#### Face to face medical education

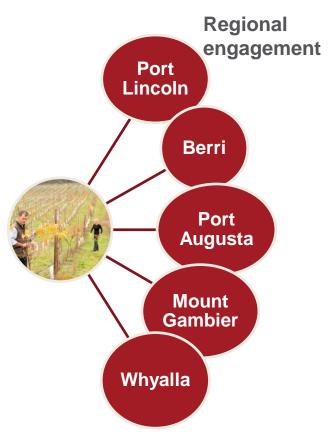
injuries within a standard consultation

(2 nart series)

Managing patients with psychological and stress injuries

Certification in South Australia

Practice Manager workshop



#### **Online education**

Two **free** CPD point accredited online learning modules for doctors:

- The role of the GP in recovery and RTW
- The Health benefits of Work

Login at the following address: http://www.sapmea.asn.au/sapmea\_calendar.html



What is worklessness?

What are the consequences of worklessness?

Family impact





#### Your Practice Support Consultant – Nathanael Brown

Email - nathanael.brown@rtwsa.com

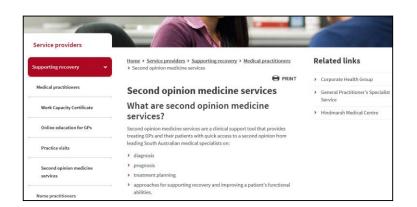


#### Second opinion medicine



#### For more information: <u>www.rtwsa.com</u>





The GP Helpline is ReturnToWorkSA's telephone and email support service

For information and direct access call:



Enquiries can also be emailed to **<u>GPHelpline@rtwsa.com</u>** 



#### What's in it for you? Marcia Vernon, Director Health and Return to Work Services

# What's in it for you?

- We're working hard to engage doctors and change the negative perception of working in the South Australian Return to Work scheme
- We're all accessing the same doctors
- A less frustrating and a more professionally fulfilling experience

## What *could* be in it for the doctors?

- All parties in the work injury system have a positive, consistent and nonlegalistic approach
- Better health outcomes for their patients
- A less frustrating and a more professionally fulfilling experience



#### Call to action



Put yourself into the shoes of a doctor. Think about one thing that you currently do that has the potential to negatively impact your relationship with them, or the outcomes they may be able to achieve for their patients (your employees)..... and try a different approach.





