Workers' Comp

Look for a Broken Spirit, Not Just a Broken Bone

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As featured on the workcompwire.com blog, this piece was contributed by Tammy Bradly, Vice President, Clinical Product Development, Coventry. Tammy has over 25 years' experience in the insurance industry. Her expertise includes medical case management, disability management, and the integration of health, disability, and workers' compensation, as well as being a contributing author to Coventry's blog, The Sounding Board.

When someone gets hurt on the job, the workers' compensation system is often adept at zeroing in on an injury and delivering timely care. But that well-intentioned focus on a patient's physical bruises can make it easy to miss the mental ones, which might be harder to spot. Today, a comprehensive approach that identifies and meets an injured worker's needs is more important than ever because the coronavirus pandemic is blanketing everyday life with added stresses that threaten to imperil a worker's recovery.

Depression often follows workplace injuries

Experience makes clear that numerous forces push and pull at workers after they are injured. These are baseline factors, such as quality of care and timeliness of care, and they play enormous roles in laying out the courses of workers' recoveries. Yet the more we dig into claims and into the research, the more we understand that less-apparent variables can also tilt the direction many cases take.

One study revealed the likelihood of injured workers being treated for depression was 45 percent greater compared with workers who were not injured. And getting hurt on the job, in particular, brings a heightened risk of mental hardship. A group of researchers found people who were injured at work were more likely to become depressed than those who were hurt outside of work. The researchers surmised that worries about reduced income, for example, might be partly to blame. They also noted, not surprisingly, that increased severity correlated with a higher likelihood of depression.

The coronavirus pandemic is exacerbating a stress pandemic

Now, in the U.S., COVID-19 restrictions, widespread layoffs, school closures, social unrest, and political tribalism are forging 2020 into one big pressure cooker. Many workers are feeling it. A late-June snapshot of the

mental state of U.S. adults from the Centers for Disease Control & Prevention revealed that younger adults, racial and ethnic minorities, essential workers, and unpaid adult caregivers reported suffering “disproportionately worse” states of mental health as well as higher substance misuse and increased thoughts of suicide.

This is why it’s imperative that adjusters and case managers consider the whole person and scan for behaviors that could signal an injured worker is having trouble managing the attendant stress of an injury. As with the need to ask questions about mental wellness from the start, it’s important to routinely look for signs that mental-health challenges are beginning to bubble up.

- Does the worker appear less confident about making a speedy recovery and getting back to work?
- Does the worker appear to be turning to self-destructive behaviors in an attempt to cope?
- Is the worker receptive to recommendations for self-care and other means of promoting wellness?

Asking these types of questions regularly can help indicate whether a worker might be enduring a mental-health condition such as depression, which can hurt the chances for a successful return to work. And taking action to identify potential barriers is important because we know the longer workers are away, the less likely they are to return at all.

Relying on proven tools can help guide injured workers back to health

For complex claims, in particular, case managers can use techniques and tools such as active listening and behavioral coaching to facilitate improvement and boost the likelihood of a successful return to work. We know these methods can promote success. A review of research pointed to the apparent benefits of tools such as rehabilitation programs and psychosocial interventions in getting injured workers back on the job.

At first, the mental and emotional components to a recovery might appear squishier and perhaps even secondary to workers’ ongoing physical needs. Yet waiting to go back and sweep up the mental-health aspects of an injury well after strains begin to emerge can jeopardize the pace and degree of recovery. Instead, by looking at the whole person from the outset, it’s possible to help an injured worker grapple with some of the forces taxing mental welfare.

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