

A proposal to drive fitness into the frontline of actuarial calculations for the setting of workers compensation premiums.

Measuring, managing and monitoring risk.

Miller Health

Miller Health

For the last 30 years I've been conducting health musculo-skeletal health and stress management seminars and assessments.

What I've noticed is that seminar participation is not compulsory and the assessment results are not being used by employers and workers compensation insurers to reduce workers compensation claims and premiums.

This document has been designed to lay out the case for employees, employers and workers compensation insurers, across all corporate organisations, to:

- work together to improve the standard of health, fitness and wellbeing in the workplace
- include fitness parameters and attendance at health, fitness and wellbeing inservice programs in the actuarial equation for setting workers compensation premiums
- put a brake on the increase of workers compensation premiums.

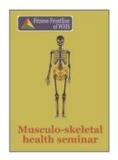
John Miller

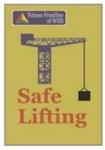
Driving fitness into the frontline of actuarial calculations for workers compensation premiumsMiller Health Pty Ltd

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MUSCULO-SKELETAL HEALTH







During the two-hour, interactive musculo-skeletal health seminar:

I alert people to the major causes of joint and muscle pain. By far and away the major cause is the lack of a regular and systematic strength and flexibility training program. Most joint and muscle pain is personally-generated. That's the bad news. The good news is that if the pain has been personally generated there's a fair chance that it can be personally ungenerated.

Tight muscles take the skeleton out of alignment and weak muscles fail to support it as it goes about everyday tasks, including spending all day sitting down. The workplace can't take the -blame for this lack of personal attention to one's health, fitness and wellbeing.

Of course, injury caused by an accident is a different matter altogether.

 participants complete a 15 point joint and muscle condition assessment. In my experience people are honest when completing the form. View results by clicking on this link: -

https://www.millerhealth.com.au/programs/musculo_skeletal_health_seminar.html

- ... then scrolling down to the heading, THE EVIDENCE
- I take participants through a ten-point strength and flexibility risk assessment including whether they have a regular and systematic strength and flexibility training
 program. SEE RESULTS by clicking on this link again: -

https://www.millerhealth.com.au/programs/musculo_skeletal_health_seminar.html

- ... then scrolling down to the heading, **THE EVIDENCE**.
- The individual assessment data is collated and presented to the corporate organisation. It includes the names of participants.
- I then teach participants the exercises they need to do to keep their skeletons in good alignment.

I've taken thousands of people from workplaces around the country through the program and have collated the results, some of which have been posted (anonymously) on one of my websites.

https://www.millerhealth.com.au/reports/index.htm

The great tragedy is that the corporate organizations I work for don't use the data to improve the musculo-skeletal health of the staff, nor do they pass on the data to their workers compensation insurer.

Plus the sessions are not compulsory, so there is always the possibility that those in poor musculo-skeletal condition don't attend. To manage risk, all staff need to attend on a 'No ticket, no start,. no workers compensation insurance' basis.

MUSCULO-SKELETAL HEALTH WORKBOOK DOWNLOAD

Microsoft Word - musculo-skeletal health seminar workbook 7-5-24

The **joint and muscle condition** and the **musculo-skeletal risk** assessments are a useful start in determining the extent of pre-existing conditions. Once a condition is registered, the sequence of events will be important when determining whether or not to accept a workers compensation claim.

But taking part in an assessment is just the beginning of a systematic musculo-skeletal health and fitness program.

Organisations need to develop a pro-active strategy to assist people with pre-existing conditions to restore poor condition to good. A compulsory 10 minute strength and flexibility 'break' each day seems to be a minimum stance to take, with longer sessions for some people.

As already mentioned, this is all part of a 'no ticket, no start, no workers compensation insurance' outlook. It's not that employers won't employ people in poor condition, it's just a matter of knowing the risk and both employee, employer and insurer doing something about it. The insurer wields the biggest stick!

This would save employers and insurers a substantial amount of money, particularly when it comes to standing up in court. There have been cases where neither the insurer's nor the employer's lawyers could stand up because they didn't have a leg to stand on.

Just wheeling in a new \$800 chair, or paying for a program of manipulative therapy, when someone blames work for their back pain, is not a good enough response.

In my estimation, 80% of joint and muscle pain is personally-generated, by tight muscles that take the skeleton out of alignment and weak muscles that have failed to support the skeleton as it goes about every-day tasks.

Neither is it good policy for an insurer to be 'forced to accept a workers compensation claim from

- a 140Kg person who allegedly injured their back while cleaning their desk.
- a bus driver in his mid-60's, weighing 130Kg, who after 6 weeks in the job, successfully claimed that his deep vein thrombosis was work-related.
- a person who was awarded an enormous sum of money for the back pain that allegedly caused by lifting a box of work files out of the boot of a car, at home - with no knowledge of pre-existing condition, no knowledge of the weight of the box, no evidence of a 'how to lift' inservice program, no evidence of a workplace musculoskeletal health assessment and no evidence of the attendance at a strength and flexibility training program.

The organisation was negligent.

ACCIDENT INSURANCE

It would be impertinent of me to suggest that what started off as an accident insurance system has - through a lack of a workplace health, fitness and wellbeing program - morphed into a program to compensate people with either pre-existing conditions or the potential to sustain personally-generated joint and muscle pain due to the lack of a regular strength and flexibility training program.

Neither a manual nor a sit down job comes without the need of a regular and systematic strength and flexibility training program, one designed to keep the skeleton in good alignment and well supported by a strong musculature.

In the musculo-skeletal risk evidence spreadsheet,

musculo-skeletal risk evidence spreadsheet 5-22 no-names.xls

55% of people gave themselves less than 5/10 for a decent strength training program and 80% scored less than 5/10 for a decent flexibility training program. A high proportion of staff did nothing.

Together with the joint and muscle conditions spreadsheet and the musculo-skeletal risk spreadsheet, work health and safety managers and workers compensation insurers will have a good idea of the risk they are carrying.

When it comes to the work I do, there are (at least) three great tragedies.

- My seminars are not made compulsory: those at most risk and in poor physical condition don't attend.
- Guess what happens after the seminars have been delivered and the results presented to the Work Health and Safety manager? I can tell you what happens, nothing. No follow up, just a box-ticking excise that doesn't even get a mention in the annual report.
- There is no relationship between myself, the organisation's senior management or the workers compensation insurer.

HEALTH CLIMATE SURVEY

In every program I conduct, I get participants to complete the Health Climate Survey. I also report the results anonymously to the organisation.

https://www.millerhealth.com.au/assessments/health_climate_survey/in_dex.html

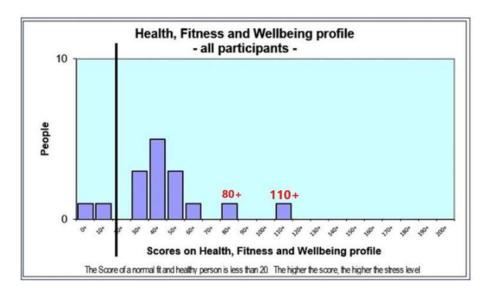


There is a copy of Health Climate Survey at the back of this document. You may like to fill it in and see how your results sit with those in the three following images.

Your eyes will roll through to the back of your neck when you see some of the results. (A low score is a good score in the 30 item questionnaire.)

- Less than 20 is 'good'.
- Between 20 and 40, is 'pretty good'.
- From 40 to 60 is 'fair'.
- 60 to 80 is 'not good'
- Over 80 is a sign that people are putting up with a lot of stress and poor health, fitness and wellbeing.

Graph #1 shows the results of a small, highly motivated and well managed public service group in the Northern Territory. It's the best set of results I've ever collected.



The symptoms, issues and concerns table is the best I've ever seen.

Symptoms/issues/concerns	% of people scoring over 5	# scoring 10			
Overweight	44				
Low level of fitness	31				
Crook back, sore shoulders	25				
Headaches	19				
Poor sleep	19				
Snoring, sleep apnoea	19				
Shortness of breath from asthma	19				
Lack of energy	13				
Elevated blood pressure	13	2			
Elevated cholesterol	13	2			
Candida	6				
Reflux, unsettled stomach	6				
Irritable bowel, constipation etc	6				
Itchy, rashes, psoriasis	6				
Elevated glucose	6	1			
Alcohol	6				
Smoking	6				
Caffeine	6				
Anxious	6				
Depressed	6	0			
Work-life balance	6				
Unhappy family life	6				
Financial status	6				
Frequent colds, flu, sinus	0				
Chest pain, palpitations	0				
Mouth ulcers	0				
Shakes, nervous mannerisms	0				
Grinding teeth	0				
Wrong job	0				
Under appreciated at work	0				

These people were not obese, just a bit overweight in their own estimation.

Graph #2 contains the results of one of country's latest public service organisations, with one of the worst set of results I've collated.



This is the sign of a toxic workplace. The physical and psychic noise is deafening.

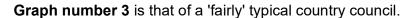
Although I can't give out the names of people, a look at the graph will show what the risk is of psycho/social workers compensation claims, despite the fact that most of the angst is personally-generated.

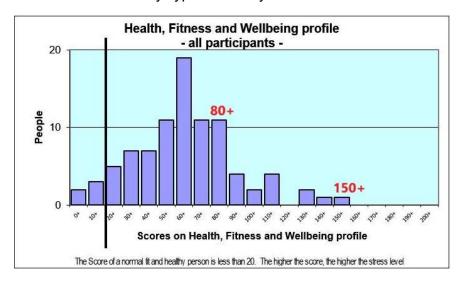
The graph triggers the need for the organisation to move heaven and earth to find and help the people who scored high.

Organisation 2 symptoms, issues and concerns table with a list as long as your arm!

Symptoms/ issues / concerns	% of people scoring over 5	No. scoring 10				
Musculo-skeletal dysfunction	79	12				
Low level of fitness	59					
Poor sleep	51					
Lack of Energy	49					
Poor work-life balance	38					
Overweight	37					
Anxious	37					
Under appreciated at work	34					
Snoring, sleep apnoea	32					
Wrong job	29					
Unhappy with financial status	28					
Headaches	27					
Depressed	26	5				
Frequent colds, flu, sinus	24					
Grinding teeth	24					
Irritable bowel, constipation etc	23					
Elevated cholesterol	22	7				
Reflux, unsettled stomach	20					
Itchy, rashes, psoriasis	17					
Elevated blood pressure	17	9				
Mouth ulcers	13					
Alcohol	12	1				
Unhappy family life	11					
Chest pain, palpitations	7					
Elevated glucose	7	2				
Caffeine	7					
Shakes, nervous mannerisms	5					
Candida	4					
Shortness of breath from asthma	4					
Smoking	2					

It's frequently the case the 'under-appreciated at work' and 'being in the wrong job' are closely related.





Whilst it's 'not bad', it's 'not good' either. People scoring over 80 are a risk to themselves, along with the organisation's productivity and workers compensation arrangements.

Organisation 3 symptoms, issues and concerns table.

Symptoms/ issues / concerns	% of people scoring over 5	# people scoring 10			
Musculo-skeletal dysfunction	46	2			
Poor sleep	41	5			
Overweight	36	8			
Snoring, sleep apnoea	35	4			
Low level of fitness	32	1			
Anxious	31				
Lack of Energy	30				
Under appreciated at work	27	3			
High alcohol intake	23	1			
Stressed financial status	23	4			
Reflux, unsettled stomach	22	2			
Elevated blood pressure	21	11			
Work-life balance	21				
Depressed	20	5			
Irritable bowel, constipation etc	16				
Elevated cholesterol	16	9			
Grinding teeth	14				
Caffeine	13				
Frequent colds, flu, sinus	12				
Itchy, rashes, psoriasis	12	2			
Wrong job	12				
Headaches	12				
Elevated glucose	9	2			
Shortness of breath from asthma	8	1			
Unhappy family life	8				
Chest pain, palpitations	5				
Mouth ulcers	5				
Smoking	5				
Candida	4				

When looking at the results in the graphs and the tables, it's no wonder that psycho/social workers compensation claims have, in recent years increased dramatically. One has to wonder why so many claims have been accepted. In one case a person was given a year off, with pay, after claiming they were being bullied. It was later identified that the person was the bully and the staff under their supervision gave back a taste of their own medicine.

This organisation did not have a detailed process of dealing with bullying or staff dissatisfaction. If bullying claims were removed from the workers compensation arena and left to the organisation, processes would soon be in place, with the organisation being responsible for the management of staff dissatisfaction. It's a human resource issue, not a workers compensation issue.

STRESS MANAGEMENT PROGRAM



The Miller Health stress management program is based on four topic areas:

- stress, what is it?
- stress, where does it come from?
- stress, what does it do to you
- stress, how to keep ahead of it.

The seminar comes with the **assessments** outlined in the My Fitness Record booklet (<u>see resources link</u>) and the <u>My Fitness Record</u> website, including ten point assessment profiles:

- health climate survey
- chemical intake
- fitness
- stress
- meaning and purpose
- family life satisfaction
- career satisfaction
- financial wellbeing

A person comes away with a good idea how their life is going and what they can do to improve it.

WORK HEALTH AND FITNESS RECORD

https://workhealthandfitnessrecord.com.au/

The work health and fitness record website is a digital repository for the results of the health, fitness and wellbeing assessments and programs completed by employees. It requires administrative support to explain to WHS managers how to install and manage the entry of data.

LINKS

Below is a link to a number of documents I've published for corporate organisations to:

- help maintain a fit and healthy workforce
- measure, manage and monitor the risk of poor metabolic, musculo-skeletal and mental health
- assist those with metabolic, musculo-skeletal and mental health issues to restore poor health to good and
- seed the idea of rating workers compensation premiums to the risk identified by the assessments I've created (together with those developed by others).

https://www.millerhealth.com.au/resources/index.html

CONCLUSION

There's a lot of information here to digest. It's certainly not the be-all-and-end-all of things, health, fitness and wellbeing that matter. I'd welcome the opportunity to come and discuss it with you.

I'd also welcome the opportunity to run a pilot program:

- taking all your staff through the musculo-skeletal health seminar and assessment program, at the same time getting participants to complete the Health Climate Survey
- developing and implementing a program focused on the continuous improvement (and assessment) of the musculo-skeletal health of your staff - including the 'no ticket, no start, no workers compensation' insurance philosophy
- providing you with the results of the assessments that accompany the program and
- determining whether it is possible for your actuaries to develop a model, wherein premium calculations include data from a range of health, fitness and wellbeing risk assessments. Nothing would be perfect, but it would put corporate organisations (and their workers compensation insurers) on the front foot when it comes to the management of the health, fitness and wellbeing of their staff.

I thank you for your consideration

John Miller Managing Director Miller health Pty Ltd.



- sample

We will adopt a mandatory approach to measuring, managing, monitoring and minimizing the risk of personally-generated body system dysfunctions being dressed up as work-related injuries. Here's a **sample check list** based on seminar participation, physical assessment (where appropriate) and self-directed learning and evaluation modules.

Safety induction.				
1.	Policy discussion, including simple safety procedures like hanging on to rails when going up or down stairs and wearing appropriate footwear and including a self-directed learning module.			
First	aid course			
2.	So people know what to do they and their work colleagues are injured. They'll know what to do when they sprain and ankle.			
Fitne	ss			
3.	Fitness seminar – plus yearly physical assessment and self-directed learning module			
Muse	culo-skeletal			
4.	Musculo-skeletal health seminar – yearly physical assessment and self-directed learning module			
5.	Specific joint assessment to determine pre-existing conditions.			
6.	Musculo-skeletal Clinical Diagnostic Assessment for those at risk and those submitting claims.			
7.	Diagnostic imaging for people with pre-existing conditions and those submitting claims.			
8.	Pro-Active Rehab program for people with pre-existing musculo-skeletal conditions and people on workers compensation.			
9.	Daily strength and flexibility exercise program for all staff.			
10.	Manual handling seminar - and self-directed leaning module.			
11.	Work-station assessment and set-up - and self-directed learning module.			
Stres	s management			
12.	Stress Management seminar – personal assessments and self-directed learning module.			
13.	Pro-active rehab program for people with stress conditions and those on compensation.			
14.	Information – pamphlets, posters, books, audio files and videos			
	Etc etc			

HEALTH CLIMATE SURVEY

Circle the number appropriate to the degree to which you experience the symptoms on the left hand side of the page. The greater the symptom, the higher the score. A GOOD SCORE IS A LOW SCORE.

	pioni, the higher the score. A GOOD GOOKE TO A LOW GOOK	None		Hardly any			A fair bit		A lot			
1.	Headaches (including migraines)	0	1	2	3	4	5	6	7	8	9	10
2 .	Lack energy and vitality	0	1	2	3	4	5	6	7	8	9	10
3.	Furry tongue, thrush, jock itch, tinea	0	1	2	3	4	5	6	7	8	9	10
4.	Poor sleep (Score 10 if you frequently use tablets)	0	1	2	3	4	5	6	7	8	9	10
5.	Snoring, sleep apnoea (Score 10 if using mask)	0	1	2	3	4	5	6	7	8	9	10
6.	Crook back, sore shoulders, stiff neck, RSI	0	1	2	3	4	5	6	7	8	9	10
7.	Frequent colds, flu and sinus	0	1	2	3	4	5	6	7	8	9	10
8.	Reflux unsettled stomach (Score 10 on tablets)	0	1	2	3	4	5	6	7	8	9	10
9.	Overweight (1 pt for every 2kg over ideal weight)	0	1	2	3	4	5	6	7	8	9	10
10	Irritable bowel, constipation, trots	0	1	2	3	4	5	6	7	8	9	10
11.	Shortness of breath from asthma	0	1	2	3	4	5	6	7	8	9	10
12.	Low level of fitness (Your estimate)	0	1	2	3	4	5	6	7	8	9	10
13.	Chest pain, palpitations	0	1	2	3	4	5	6	7	8	9	10
14 .	Itchy, rashes, skin outbreaks, psoriasis	0	1	2	3	4	5	6	7	8	9	10
15.	Mouth ulcers, cold sores	0	1	2	3	4	5	6	7	8	9	10
16 .	Elevated blood pressure (Score 10 if on tablets)	0	1	2	3	4	5	6	7	8	9	10
17.	Elevated blood cholesterol? (10 if on tablets)	0	1	2	3	4	5	6	7	8	9	10
18.	Elevated blood glucose? (Score 10 if on tablets)	0	1	2	3	4	5	6	7	8	9	10
19.	Shakes, nervous tics and mannerisms	0	1	2	3	4	5	6	7	8	9	10
20.	Grinding teeth	0	1	2	3	4	5	6	7	8	9	10
21.	Alcohol intake (2 points per drink/day)	0	1	2	3	4	5	6	7	8	9	10
22.	Smoking behaviour (1 point/cigarette/day)	0	1	2	3	4	5	6	7	8	9	10
23.	Caffeine intake (1 point per cup)	0	1	2	3	4	5	6	7	8	9	10
24.	Anxious about life, insecure, apprehensive	0	1	2	3	4	5	6	7	8	9	10
25.	Are you depressed? (Score 10 if on medication)	0	1	2	3	4	5	6	7	8	9	10
26.	Are you in the wrong job?	0	1	2	3	4	5	6	7	8	9	10
27.	Do you feel underappreciated at work?	0	1	2	3	4	5	6	7	8	9	10
28.	Do you have a poor work/life balance?	0	1	2	3	4	5	6	7	8	9	10
29.	Unhappy with your family life?	0	1	2	3	4	5	6	7	8	9	10
30.	Unhappy with your financial status?	0	1	2	3	4	5	6	7	8	9	10

The score of a normal, fit and healthy human being is less than T	TOTAL .	
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Scan the completed page, send it to me (john.miller@millerheklth.com.au) and I'll let you know what your scores mean.



For generations, when Australians meet, the greeting 'How ya goin' or 'ow-y-garn' has been a staple of conversation. More often than not, the answer is a simple 'not bad'. But think about it - could there be two more negative words than 'not' and 'bad' to describe how you're really feeling?

The 100-point 'How Are You Going' scale offers a more precise way of answering this familiar question. The scale ranges from zero (miserable) to 100 (fantastic), so people can rate how they're feeling on any number between 0 and 100.



Once people have registered, they will be able to record their weekly 'How Are You Going' score.

Every week they'll receive a reminder email asking them to log in and record a score. It's an easy, ongoing way to reflect on how they're feeling - and contribute to a collective snapshot of the nation's health, fitness and wellbeing.

We also believe this data can be valuable to organisations - from businesses tracking the wellbeing of their employees, to health and insurance providers getting a sense of how people are doing.

Corporate Organisations Group Code

If you are a manager of a corporate or community organisation and you'd like to get a snapshot of the health, fitness and wellbeing of your group, go to the <u>Group Code</u> page. If you want more information about the group score process, send us a note using the contact form and we'll let you know how it can be arranged.

In the meantime stay tuned, highly tuned.