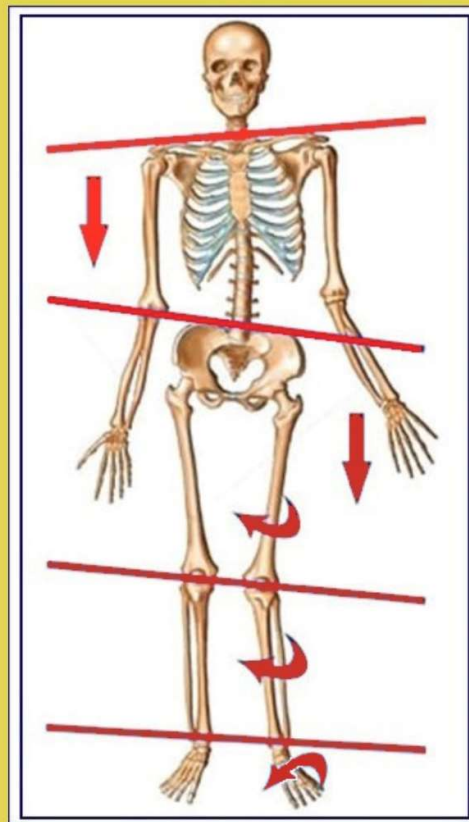




Fitness Frontline

# Musculo-skeletal Health Seminar Report



Miller Health

## INTRODUCTION

John Miller made several 2-hour presentations of the Musculo-skeletal Health Seminar to staff of the **Woop Woop Council** in March 2024.

19 participants attended, 15 female and 5 male.

Participants completed several assessments

- Health Climate Survey
- Joint and muscle condition
- Musculo-skeletal risk assessment.

The focus of the seminar was explaining to participants the need to keep their skeletons in good alignment and well supported by a strong musculature.

Participants were taught a range of flexibility and strength exercises designed to support good alignment and enable people to go about everyday tasks without breaking down.

The principles outlined were

- the skeleton works as a system, with all parts being inter-related - based on a tension integrity model.
- the cause of the pain is rarely at the site of the pain – therefore rubbing the spot where it hurts is unlikely to ‘cure’ the cause of the problem.
- most joint and muscle pain is personally-generated by tight muscles attached to the pelvis that take first the pelvis then the bones above and below it out alignment. Ligaments, tendons and muscles are stretched beyond their pain threshold. The ends of bones begin to rub against each other causing bone inflammation (arthritis).

### **Musculo-skeletal Health Seminar Report**

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12/3/24

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Bill Smith  
Work Health and Safety Manager  
Woop Woop council

Dear Bill

First up, thanks for the opportunity to visit Woop Woop and make the presentations to the Woop Woop Council staff.

The report is mainly statistical, but with the attached spreadsheets it will give you and the Council management a good snapshot of the health, fitness and wellbeing of your staff. I suspect the results would be similar if all Council staff had participated.

I've attached 3 spreadsheets: **(Please note, these spreadsheets accompanied the original; report but couldn't be included in the Woop Woop edition.)**

1. **Health Climate Survey** - with no name or gender identification.
  - The lower the score the better.
  - The average score was 81 - not good, but few organisations get less than 80.
  - A lot of people are putting up with lot of 'background noise'.
  - To get a feel for what the scores mean click on this link:  
[https://www.millerhealth.com.au/assessments/health\\_climate\\_survey/what\\_does\\_your\\_health\\_climate\\_survey\\_profile\\_score\\_mean.html](https://www.millerhealth.com.au/assessments/health_climate_survey/what_does_your_health_climate_survey_profile_score_mean.html)
2. **Joint and muscle condition** – with names
- 3 **Musculo-skeletal risk assessment** – with names

When you rake through the musculo-skeletal spreadsheets you'll discover the people who have pre-existing conditions.

The report concludes with three articles that outline the reasons why this work is important and money saving.

Again, thanks for your hospitality while in Woop Woop.

Regards and best wishes

John Miller

## 1. WORKERS COMPENSATION CLAIMS

The corporate Musculo-skeletal Health seminar is designed to:

- provide staff with information about:
  - their musculo-skeletal health and their wellbeing
  - inform them of the precursors of (personally-generated) joint and muscle pain and
  - teach them the exercises they need to do on a regular and systematic basis to keep their skeleton in good alignment and their muscles strong enough to support it as it goes about everyday tasks – without breaking down.
- provide your organisation with a snap shot of the health, fitness and wellbeing of your staff and the risk it are carrying when it comes to workers compensation claims for personally-generated joint and muscle pain.
- alert your organisation to the fact that your workers compensation insurer is neither measuring risk nor rating your premiums against risk. In effect, the 'insurer' is an escrow agent betting with your organisation's money.

Once employers understand the situation, it is the employer who has to

- measure, manage and monitor the risk of accidental injuries
- make sure staff are aware that the organisation does not class personally-generated metabolic, musculo-skeletal or mental health dysfunctions as workplace accidents or incidents. Medicare and private health insurance are designed to deal with these dysfunctions.

To this end, organisations needs to measure, manage and monitor the fitness (aerobic fitness, strength and flexibility) of staff in order to put a stop to pre-conditions being 'tipped over the edge' and dressed up as work-related injuries caused by activities that normal fit and healthy people take in their stride.

This extends to joint and muscle pain that accompanies sitting down for extended periods of time without a regular and systematic strength and flexibility training program.

- put in train procedures to deal with bullying and other socio/psycho complains – and make sure they do not enter the workers compensation arena
- make sure all staff have had the training listed in the No Ticket No Start page.

Based on the data collected from the feedback sheet completed by participants at the end of each session, most staff have indicated that they are willing to participate in regular short 'fitness' sessions during work time.

When it comes to worker compensation claims, you now have detailed information of

- staff with pre-existing conditions.
- the strength and flexibility of each staff member
- the involvement of individual staff members in regular strength and flexibility sessions in work time – and a record of their participation.
- the willingness of staff with ‘serious’ joint and muscle pain to take part in a number of half hour strength and flexibility sessions each week in work time – and their own time
- the organisation’s over-riding commitment to providing staff with encouragement and time to improve their strength, flexibility and skeletal alignment –

## 2. HEALTH CLIMATE SURVEY – a good score is a low score

The mind is just one of many body systems in a complex ecosystem. The mind and the rest of the body systems are intimately connected. For instance, when we get mentally stressed, the stress registered in the mind is relayed to the rest of the body via the autonomic nervous system. Conversely when one of the other body systems becomes stressed, the stress is relayed to the mind. You may not realize how stressed you are until you complete this questionnaire, but your body does. The body is incapable of dishonesty!

**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. Total the score at the bottom of the page.

	None	1	2	3	4	5	6	7	8	9	10
1. Headaches (including migraines)	0	1	2	3	4	5	6	7	8	9	10
2. Lack of energy and vitality	0	1	2	3	4	5	6	7	8	9	10
3. Candida - jock itch, thrush, tinea, furry tongue	0	1	2	3	4	5	6	7	8	9	10
4. Poor sleep. (Score 10 if on medication)	0	1	2	3	4	5	6	7	8	9	10
5. Snoring and/or sleep apnoea (Use gas mask, score 10)	0	1	2	3	4	5	6	7	8	9	10
6. Musculo-skeletal dysfunction: joint and muscle pain	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. Unsettled stomach, reflux. (If on medication score 10)	0	1	2	3	4	5	6	7	8	9	10
9. Overweight - 1 point for every 2Kg overweight	0	1	2	3	4	5	6	7	8	9	10
10. Irritable bowel, constipation, diarrhoea, piles ...	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*	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. Rashes, zits, skin outbreaks, psoriasis, itchy skin	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 medication)	0	1	2	3	4	5	6	7	8	9	10
17. Elevated blood cholesterol (Score 10 if on medication)	0	1	2	3	4	5	6	7	8	9	10
18. Elevated blood glucose (Score 10 if on medication)	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. Drinking too much alcohol (2 points per drink/day)	0	1	2	3	4	5	6	7	8	9	10
22. Smoking too many cigarettes (1 point per cigarette per day)	0	1	2	3	4	5	6	7	8	9	10
23. Drinking too much caffeine (1 point per cup per day)	0	1	2	3	4	5	6	7	8	9	10
24. Anxious about life, insecure, apprehensive about the future	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 under-appreciated 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. Are you unhappy with your family life?	0	1	2	3	4	5	6	7	8	9	10
30. Are you 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 20 TOTAL

### 3. HEALTH CLIMATE SURVEY - results

	Symptoms / issues / concerns	Percent people scoring over 5	# people scoring 10
	Musculo-skeletal dysfunction	68	5
	Overweight	63	5
	Poor sleep	58	1
	Low level of fitness	53	
	Anxious	53	3
	Under appreciated at work	53	2
	Work-life balance	53	2
	Depressed	42	5
	Headaches	37	
	Lack of Energy	37	
	Wrong job	32	
	Stressed financial status	32	1
	Reflux, unsettled stomach	26	
	Itchy, rashes, psoriasis	26	2
	Grinding teeth	26	
	Unhappy family life	26	
	Candida	21	
	Frequent colds, flu, sinus	21	1
	Elevated blood pressure	21	4
	Snoring, sleep apnoea	16	1
	Chest pain, palpitations	16	
	Elevated cholesterol	16	2
	Smoking	16	
	Caffeine	16	1
	Shortness of breath from asthma	11	
	Shakes, nervous mannerisms	11	
	Irritable bowel, constipation etc	5	
	Mouth ulcers	5	
	Elevated glucose	5	1
	High alcohol intake	0	

There is no excuse for staff feeling under-appreciated at work. Managers are paid to manage.

There is strong evidence of the need to conduct daily strength and flexibility training sessions and institute a personal and career development training program.

The Health Climate Survey is a very useful tool to gauge the risk of psycho/social workers compensation claims, most of which can be headed off by good management and a fit and healthy staff

The Health Climate Survey spreadsheet is attached.



## 4. JOINT AND MUSCLE CONDITION ASSESSMENT

	Dreadful							Good				
	0	1	2	3	4	5	6	7	8	9	10	Score
1. Lower back. Rate the current condition of your lower back.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2. Upper back. Rate the current condition of your upper back.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3. Neck. Rate the current condition of your neck.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4. Right shoulder. Rate the current condition of your right shoulder.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5. Left shoulder. Rate the current condition of your left shoulder.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6. Right wrist. Rate the current condition of your right wrist and hand.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
7. Left wrist. Rate the current condition of your left wrist and hand.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
8. Right hip. Rate the current condition of your right hip.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
9. Left hip. Rate the current condition of your left hip.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
10. Right knee. Rate the current condition of your right knee.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
11. Left knee. Rate the current condition of your left knee.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
12. Right lower leg. Rate the current condition of your lower leg, and foot. Do you suffer from shin splints, Achilles tendonitis ...	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
13. Left lower leg. Rate the current condition of your lower leg, and foot. Do you suffer from shin splints, Achilles tendonitis ...	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
14. Right foot. Rate the current condition of your right foot. Do you suffer from heel pain, plantar fasciitis, malformed toes ....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
15. Left foot. Rate the current condition of your left foot. Do you suffer from heel pain, plantar fasciitis, malformed toes ....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Total</b>												<input type="text"/>

## 5. JOINT AND MUSCLE CONDITION - results

	Specific joint condition	% of people scoring under 7	# people scoring 4 or less
	Neck	58	8
	Lower back	47	8
	Left shoulder	47	7
	Right shoulder	42	5
	Right knee	37	2
	Left hip	26	4
	Left foot	21	2
	Left knee	16	1
	Right hip	16	2
	Left Lower leg	16	2
	Right wrist	11	0
	Right foot	11	1
	Upper back	5	0
	left wrist	5	0
	Right lower leg	0	0

It is suspected that most of the pain is personally-generated by the lack of a regular and systematic strength and flexibility training program. The corollary is that most can be fixed by a regular and systematic strength and flexibility training program at work, at home and at a fitness centre.

Participants have been taught a range of exercises.

Some participants would benefit from a one-on-one Clinical Diagnostic Assessment

[https://www.millerhealth.com.au/assessments/clinical\\_diagnostic\\_assessment/index.html](https://www.millerhealth.com.au/assessments/clinical_diagnostic_assessment/index.html)

## 6. MUSCULO-SKELETAL RISK ASSESSMENT

1. Current condition.

How would you rate the current condition of your musculo-skeletal system?

Dreadful										Excellent
0	1	2	3	4	5	6	7	8	9	10

2. Body composition: how close are you to your ideal weight?

Current weight ..... Ideal weight ..... Percent body fat .....

Kg over ideal wt	>25	<25	<20	<15	<10	<7	<4	<2
% fat men	<40	<40	<36	<32	<29	<26	<23	<20
% fat women	<50	>50	<46	<42	<39	<36	<33	<30
	3	4	5	6	7	8	9	10

3. Lower body strength – squats – until exhaustion #.....

Squat so your bottom goes down to at least the crease in the back of your knees and stand up straight with legs fully extended.

>6	6	8	10	12	14	16	18	20	22	24
0	1	2	3	4	5	6	7	8	9	10

4. Front of body strength – situps feet held - until exhaustion #.....

Men on toes, women on front of thighs.

>6	6	8	10	12	14	16	18	20	22	24
0	1	2	3	4	5	6	7	8	9	10

5. Upper body strength – press-ups – until exhaustion #.....

Men on toes, women on front of thighs.

>6	6	8	10	12	14	16	18	20	22	24
0	1	2	3	4	5	6	7	8	9	10

6. Hamstring flexibility – sit and reach. How far down can you reach.

Can't touch	Fingers			Palm			Wrist
0	4	5	6	7	8	9	10

7a. Left buttock flexibility – sit up straight, legs crossed, hands clasped behind back.

Right leg under	Big fail	Nope	Almost	Just	Good	Perfect
0	1	2	3	4	5	

7b. Right buttock flexibility – sit up straight, legs crossed hands clasped behind back.

Left leg under	Big fail	Nope	Almost	Just	Good	Perfect
0	1	2	3	4	5	

Ttl

Shoulder function – stand against the wall, arms vertical in the 'surrender' position. The further they are away from the wall (in cms) the lower the score.

>15	15	13	11	9	7	5	3	2	1	Flat
0	1	2	3	4	5	6	7	8	9	10

9. Strength training behaviour

Do you have a regular strength training program. Sessions per week.

0		1			2					3
0	1	2	3	4	5	6	7	8	9	10

10. Flexibility training behaviour

Do you have a regular flexibility training program. Sessions per week.

0		1			2					3
0	1	2	3	4	5	6	7	8	9	10

The 'pass mark' is 70/100.

TOTAL/100

## 7. MUSCULO-SKELETAL RISK ASSESSMENT - results

	Musculo-skeletal risk	% scoring less than 7/10	# people scoring 4 or less
	Flexibility training behaviour	74	13
	Strength training behaviour	68	13
	Current condition	53	4
	Upper body strength - pressups	47	9
	Closeness to idea weight	42	4
	Front of body strength - situps	42	7
	Buttock flexibility	42	4
	Hamstring flexibility	32	4
	Shoulder function	21	3
	lower body strength - squat	16	2

The results speak for themselves, most people don't have a regular and systematic strength and flexibility training program – in which case they're likely to blame the desk, the chair and the monitor, the keyboard, the steering wheel ... for their joint and muscle pain.

The remedy, regular (daily) strength and flexibility sessions – 10 minutes – for all staff..

## 8. WORKSTATION ASSESSMENTS

While at the Council offices I did some cursory workstation assessments, focusing on

- outlining the ideal sitting position – back of the chair bolt upright, chair pushed in so abdomen presses into the desk
- chair and desk at a height where feet are flat on the floor, thighs parallel to the floor and between 2 and 3 cms beneath the desk
- monitor pushed further the away and set at a convenient height so the head is upright and eyes looking straight forward.
- Where the height of desks is not adjustable, some people will need a foot 'stool.'
- where two desks are together, it is recommended that staff be provided with a corner keyboard tray.

There are quite a few workstations that would be better set-up with such a tray.



## 9. RESOURCE BOOKLETS

Seminar participants were provided with the (expansive seminar workbook.

Copies of two other publications were forwarded to the Council for distribution to all staff

- Sit Up Straight
- Safe Lifting.

These books, together with copies of

- How to Relieve Back Pain Yourself and
- Back in Alignment

can be downloaded from this page

[https://www.millerhealth.com.au/programs/musculo\\_skeletal\\_health\\_seminar.html](https://www.millerhealth.com.au/programs/musculo_skeletal_health_seminar.html)

and be provided to all staff members.

# **10.**

# **THE RATIONALE**

**The rationale for the organisation to immerse itself in a regular and systematic strength and flexibility program – daily for ten minutes – and also establish a more intensive corporate health program is contained in the three articles that follow:**

- **Hard talk**
- **No Ticket No Start**
- **Classic Cases.**

### 11. HARD TALK

There are a number of issues relating to fair and sustainable workers compensation arrangements that need to be addressed by insurers, their premium holders and individual employees.

1. The health, fitness and wellbeing of the community is in decline. This is affecting workplaces.
2. People suffering from personally-generated metabolic, musculo-skeletal and mental health dysfunctions want someone else to pay for their treatment – and time off work. Due to current workers compensation insurance arrangements, corporate organisations have become sitting ducks.
3. Workers compensation was originally designed to either rehabilitate or compensate workers for work-related accidents and incidents. The system has morphed into a quasi-health insurance scheme, with claims being made (and accepted) for non-work-related, personally-generated, body system dysfunctions.
4. It's in the interests of employers to encourage their staff to keep themselves fit and healthy to the best of their ability. Plus there is an imperative to reduce the number of workers compensation and sick leave claims – in particular fending off claims from people who haven't had an accident or workplace incident. Organisations must know which staff have pre-existing conditions.
5. As a condition of eligibility for workers compensation insurance, organisations must know which staff are in poor physical condition, particularly those lacking lack strength and flexibility. Organisations need establish a process to help staff improve their metabolic, musculo-skeletal and mental health.
6. It's in the interests of employees to keep themselves in work-fit condition. Number 1 reason? they feel better, they have more energy and vitality. Number 2 reason? they are less likely to experience metabolic, musculo-skeletal and mental health distress.
7. A distinction needs to be made between what is a sickness (with guaranteed sick leave entitlements), what is a work-related injury (with workers compensation entitlements) and what is a personally generated body system dysfunction (for which there is no reason to be compensated by an employer).
8. The vast majority of corporate organisations don't continuously measure, manage or monitor the health, fitness and wellbeing of their staff. They don't have a good handle on pre-existing conditions.
9. Workers compensation premiums are not rated against risk. Workers compensation insurers don't measure risk, (neither do they demand that their premium holders do so). They are, for all intents and purposes, **escrow agents**. Organisations need to manage the risk themselves.
10. Organisations have to measure, manage and monitor the risk themselves and provide evidence when it comes to supporting or not supporting claims. It's their money that's at stake, not that of the insurer.
11. Based on the principle that an insurance is not an insurance unless premiums are rated against risk, it's imperative the workers compensation insurance premiums are rated against both personal and organisational risk. As an aside, deleting the word 'compensation' from workers compensation insurance would reduce the expectation of an entitlement – like a \$500,000 payout for a crook back.
12. When it comes to psycho/social issues, there are two things organisations need to be aware of – those that are personally generated and those that are caused by poor management. It's in the interests of organisations have in place, from the bottom to the top, procedures for dealing with workplace-generated employee dissatisfaction – and ensure that staff have access to personal development training.



## 12. NO TICKET NO START

A mandatory approach to measuring, managing, monitoring and minimizing the risk of personally-generated body system dysfunctions (metabolic, musculo-skeletal and mental) being dressed up as work-related injuries – makes eminently good sense. 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. Designed so people know what to do they and their work colleagues are injured or distressed - including a self-directed learning module..

### Fitness

3. Fitness seminar – plus yearly physical assessment and self-directed learning module

### Musculo-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. Daily 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.

### Stress 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

### 13. CLASSIC WORKERS COMPENSATION CASES

A classic example of poorly diagnosed causation occurred in the case of a driver weighing 140Kg employed by a bus company. Eight weeks into the job he submitted – and had approved - a claim for deep vein thrombosis.

Or take the case of workers compensation insurer who paid an employee \$507,223.34, plus costs for hurting her back lifting a box of work files out of the boot of her car at home.



#### THE AMBER LIGHT

A number of 'amber lights' are associated with this case.

The case is public knowledge having been reported in the 'The Canberra Times'  
<http://www.canberratimes.com.au/act-news/worker-awarded-500000-despite-untrue-evidence-20130901-2sz27.html>

Despite the judge finding that the claimant continued to perform a range of lifting tasks, including operating a chain saw, and despite the judge referring to 'her evidence being untrue', nevertheless she was awarded compensation because, *'Both defendants were found to have been negligent in failing to undertake an assessment of the risk of lifting the container and in implementing appropriate precautions to minimise risk.'*



#### THE ABSURDITY

In reality, what the judge is saying is, 'Someone has to follow every employee around to make sure they don't do anything to injure themselves while lifting something. This means going to people's homes to check the weight of a box, the lifting technique and taking into account any pre-existing musculo-skeletal health conditions when a box of work files is lifted out of the boot of the car.

The claimant claimed she hadn't been given instructions in lifting a box out of the boot of her car. The judge saw that as a black mark against her employer. But, surely anyone who has ever collected the groceries or been on a holiday would know how to lift something out of the boot of a car.

What did the box weigh? Did it weight more than the chainsaw or a bag of groceries?

The court case would not have proceeded if the claimant had completed:

- a manual handling course
- a work station assessment
- a musculo-skeletal (strength and flexibility) risk screen
- a joint and muscle condition assessment

If the scores for the musculo-skeletal risk screen and joint and muscle condition highlighted both pre-existing conditions and a low strength and flexibility rating, the claimant could have been advised not to lift anything over (say) 10Kg, thus saving the 'insurer' \$500,000.

Furthermore, I doubt whether the organisation or the insurer mandated strength, flexibility and skeletal alignment assessments after the incident

The claimant could soon be preparing for another \$500,000 windfall!

### **THE IRONY**

The irony of it all is that while one woman gets \$500,000 for lifting a box out of the boot of her car, another women Tia-Clair Toomey, weighing in at 58 Kg, lifts 114Kg above her head and wins a gold medal at the 2018 Commonwealth Games.



### **AND THERE'S MORE**

News of a case was reported by the 'The Canberra Times' based on details published by the Administrative Appeals Tribunal on its website.

<http://www.canberratimes.com.au/national/public-service/breast-size-and-tummy-tuck-surgery-becomes-public-service-compensation-battleground-20150130-131o68.html>

If the claim had been successful it would have opened the floodgates for all over-weight men and women with sore necks and shoulders to line up for publicly funded weight reduction surgery. Defining the meaning of the word 'large' would be an interesting legal exercise!

### **PSYCHO/SOCIAL CLAIMS**

In recent years psycho/social workers compensation claims have skyrocketed. How much is personally generated and how much is generated by poor management is open to conjecture. 'Insurers' are walking claims through without proper assessment. Organisations are failing to put into action standard procedures for staff and management to deal with employee dissatisfaction.

The Health Climate Survey provides both individuals and organisations with evidence of risk.

