

Prescribing active recovery

A patient is likely to have better health outcomes by remaining at or returning to work. Return to work is not possible for everyone, but certifying time off work, particularly when absence is prolonged, can have significant side effects.

*Research shows that the sooner an injured worker resumes their usual activities, the less likely their injury will become a long-term problem.

For those patients whose medical condition prevents them from returning to work immediately:

- Consider a work capacity certificate with a short period of incapacity, a medical review date and a predicted date for return to suitable duties.
- Consider predicting a recovery timeframe equivalent to the same injury, if it were not compensable.

Examples of additional comments about functional abilities you may record in the work capacity certificate.

Neck

Alternate neck posture approximately every 5 minutes.

Alternate position of arm every 10 minutes.

Can work with affected arm close to body.

Avoid sustained neck rotation.

Elbow

Ensure movements are variable.

Can lift weights up to 5kg close to the body.

Avoid forearm rotation.

Elbow strap encouraged.

Knee

Can crouch, kneel and adopt low level postures for brief periods occasionally.

Avoid prolonged static standing.

Can use stairs and ladders occasionally.

Can walk on smooth terrain.

Shoulder

Can work below shoulder height.

Can push/pull light loads.

Can lift up to 5kg away from the body and 10kg close to the body.

Low back

Can lift and bend occasionally.

Can lift up to 10kg occasionally.

Wrist

Occasional gentle wrist movements encouraged.

Occasional gentle forearm rotation movements encouraged.

Can push and pull light loads.

Ankle

Primarily seated tasks.

**AFOEM Helping people return to work—using evidence for better outcomes—A position statement*

Graduated return to work

Work is a therapeutic intervention and is part of treatment. Prescribing a graduated increase in work and home activity over a period of time is a practical way of promoting optimal functioning and assisting patients back to work. Some of your patients may benefit working non-consecutive days, whereas others could work fewer hours on consecutive days.

Here are three examples of a graduated return to work schedules. *Note: These are provided as a guide only.*

Example 1

Week 1: Full hrs, 3 days per week

Week 2: Full hrs, 4 days per week

Week 3: Full hrs, 5 days per week

Example 2

Week 1: Unfit

Week 2: 3 hrs per day, 3 days per week

Week 3: 5 hrs, 3 days per week

Week 4: Full hrs, 4 days per week

Example 3

Week 1: Unfit

Week 2: 3 hrs per day, 3 days per week

Week 3: 3 hrs per day, 5 days per week

Week 4: 5 hrs per day, 5 days per week

Week 5: Full hrs, 5 days per week

How to record a graduated return to work schedule on a *Work Capacity Certificate* (example only)

I recommend:

A graduated increase in working hours over weeks from hours a day to your normal hours/ hours a day

Non-consecutive working days for a period of days or weeks

I would like more information about the options available for your return to work

I would like a copy of your recovery and return to work plan



For more information and direct access, call the ReturnToWorkSA GP helpline on **1800 180 545**, or email gphelpline@rtwsa.com.

 **GP Helpline**
1800 180 545