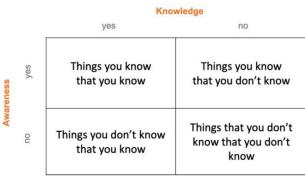


Blind Spots

by Harvey Warren, injured worker, and author of "The Optimized Patient"

The late Secretary of Defense, Donald Rumsfeld famously said, "There are known knowns — there are things we know we know," when asked for evidence that Saddam Hussein tried to supply weapons of mass destruction to terrorist groups. "We also know there are known unknowns — that is to say, we know there are some things we do not know. But there are also unknown unknowns, the ones we don't know we don't know." The things we don't know that we don't know are also understood in management as blind spots. From the patient point of view, it seems to me that there are some blind spots in the worker compensation "grand bargain" that, if addressed, might save the patient and employer a lot of pain and expense.

If your head is a spinning on the knowns and unknowns, perhaps the chart below will help. I am interested in the lower right-hand corner, things that you don't know that you don't know. Simply put, blind spots.



I believe patient education is a critical blind spot in the process of returning injured workers to full health and back to work. In addition to the blind spot about the need for patient education is the inclination of the workers' compensation industry to try to understand the need in terms of return-on-investment. Increasingly, employers and insurers are coming to know that the patient is the wildcard in the recovery process. This truth has long been known by doctors who lament that the top-notch medical care they provided has been ruined by a patient who does little to help or a lot to hinder their own recovery because there is nobody showing them the way. I often joke about the fact that I was absent the day they taught Surgical Recovery 101 in school. I am guessing all of you missed that class too.

Most case managers would agree that injured workers will typically Google whatever injury they have to get a general understanding of what their future looks like. I know I did. What I did not do was look for information on how to best rehabilitate myself. I did not know that I did not know that a good recovery requires the kind of information that you just don't get from your doctor or your physical therapist. Who knew? Interestingly, NBA Hall of Fame basketball star Bill Walton knew. His life in professional sports taught him that without a good coach your chance of a winning outcome is greatly diminished. He applied that notion, as I did, to the idea of injury recovery. After 38 orthopedic surgeries, Bill is quite clear about the need for a coach in recovery. The fact is, he personally gave me one of the key recovery activities that I have been faithfully doing for the last 8 years. I had a blind spot about the value of swimming in spine recovery. I did not even know to ask about aqua therapy until Bill "opened my eyes".



Is there any value in providing an extra layer of recovery support to the injured worker in the form of patient education? Our experience has shown there are several values beginning with alerting the employee to the fact that recovery is work and requires both attention and commitment. As obvious as that may seem, think about whether or not your program and case managers actually explain that fundamental necessity to the injured workers they are helping. Do they provide the motivation and hopefulness necessary to keep the injured worker engaged? Do they create a feeling of "caring" beyond paying the bills, that offsets the anger and isolation that often result from an injury and turn a simple recovery into complex litigation?

The blind spot in the worker compensation grand bargain is there if your eyes are open to it. My hope, in the months ahead at conventions where our team will speak, is to share with you what we now know about the unknown value of patient education.

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