



Despite occupational safety and health improvements in the workplace over the past 30 years, occupational injuries continue to be a prominent public health concern. In 2023, there were over 2.6 million nonfatal workplace injuries and illnesses, according to the U.S. Bureau of Labor Statistics, almost half of which (946,500) involved days away from work (BLS Economic News Release).



What happens to the employees when they are sidelined by injuries and how quickly they return to work is the concern of post-injury case management. Post-injury case management is not a new subject. In fact, it has been around long enough to be pushed back in importance when compared to other more pressing and "significant" matters, like SIFs, HOP, energy-based risk assessments, etc. Between these new topics, the mass exodus of older workers from the workplace, the inflow of younger personnel, and the post-COVID radical changes in healthcare, we are at the point where the subject of case management must be re-introduced, as if anew to the industry. So, the intent of this paper is three-fold: to re-introduce the subject of case management; bring it back to the forefront of our attention; and to propose an upgrade to our nomenclature and the thinking behind it from case management to care management.

First, it is necessary to re-introduce this subject because its practice seems to have been neglected and our workers are suffering in the meantime. Second, while the other urgent matters, such as SIFs, HOP, and energy-based hazards are pertinent, we must not allow them to push case management to the background. Doing so is a disservice to our workers and mismanagement of our resources. Third, it is time to upgrade what we call it but even more importantly the thinking behind it. The subtle but important change from case management to care management better reflects the holistic and mutually beneficial process of caring about the injured worker's physical and mental wellbeing while also stewarding wisely the employer's resources in the process.

In other words, updating our thinking and upgrading our semantics would not only keep up with the times, but also be in the best interest of the injured worker, both physically and mentally, as well as the employer.

One other introductory matter that needs to be identified is the basic presupposition of this paper, namely that work generally benefits physical and mental health by providing purpose, social connection, and personal growth (Kristman, Boot, Sanderson, Sinden and Williams-Whitt, 2020). Thus, speedier return to work is the goal of all care management.



Legacy Case/Care Management Process Overview

Much of our current emphasis within a typical safety management system falls on preventing incidents, injuries, and fatalities. This just seems to be ethically and morally right. Prevention is certainly important, as long as we realize that it will never be fully successful (Conklin, Workplace, 54). To be completely successful, our prevention efforts must be linked to our ability to predict these unwanted events. And we cannot accurately predict what the next event will be, when it will be, how it will take place, etc. One of the main reasons for this inability is human fallibility. Because we all make mistakes and can never stop making mistakes, there is no way to predict in practice when the next mistake will happen, where it will happen, or who it will happen to. The only thing that we can predict with a great degree of certainty is that it (the mistake) will happen again and again and again.





So, with that in mind, in addition to prevention, we must focus also on recovery — the erection of proper controls that will build the capacity for safer outcomes. By designing procedures, protocols, policies, and SOPs with human fallibility in mind, we can reduce harm from incidents we can't predict or prevent. In other words, we can further protect our people by designing ways to fail safely.



One of those controls or recovery methods is holistic management of post-injury care, or what we historically referred to as case management. But first, why is this needed? Workplace injuries and illnesses come with a significant cost. There is the physical pain and suffering experienced by the injured worker, the significant impact on the worker's mental health, financial impact due to earnings losses and reductions, and much more. Then, of course, accidents are extremely costly to the employers as well. Employers face the medical and indemnity benefit costs, indirect costs from lost productivity, increased insurance costs, the impact of higher lagging indicators, damage to the morale of the team, reputational consequences, and so much more. Estimates suggest that the costs of injuries to employers total tens or even hundreds of billions of dollars per year (Leigh, Landrigan and Markowitz, 2000).

While we can't change what happened, we can influence the process, duration, and ease of recovery — which is where return-to-work programs, or care management, come in. Before exploring effective care management, it's helpful to briefly review traditional case management.



Case management is a systems-based approach to post-injury care, covering everything from the moment an OSHA-recordable injury occurs to full resolution. While definitions vary, here is one of the more effective ones: "Case Management is a collaborative process of assessment, facilitation and advocacy of options to assist with an individual's health needs and return to work. Case management is achieved through communication and use of available resources to promote quality and cost-effective outcome" (Richey, Case Management). A serious case management program involves a cooperative integration between the injured worker, their employer, treating practitioners, external service providers, and claims or insurance companies.



From Case Management to Care Management

The term *case management* has a very corporate, impersonal, and almost administrative feel to it. It exudes a lack of care for the individual worker. It tends to emphasize the preferential approach to taking care of the employer's bottom line, as opposed to caring for the employee. Given these and many other negative connotations, it's time to update our terminology.

Care management takes a more holistic approach, aiming for a timely return to work that supports full physical and mental recovery. Research indicates that workers return to work approximately 1.4 times sooner in organizations with care management programs compared to those without them (McLaren, Reville, and Seabury, 2010). This shortens the median return-to-work time by three to four weeks, often benefiting mental recovery even more than physical.

Effective care management recognizes that injuries affect both the body and mind. In fact, although physical disabilities affect an individual's ability to return to work after injury, several studies have found that mental and emotional problems after traumatic injury are significant determinants in return to work and may have more influence than physical factors (McCrimmon & Oddy, 2006; Sullivan, Adams, Thibault, Corbiere, & Stanish, 2006).

Care management is fueled by the actively supportive role of the employer and takes a comprehensive approach, balancing physical recovery and mental health. Effective care management also benefits employers, offering financial, cultural, and reputational gains. Lower worker compensation costs, reduced attrition, and higher employee satisfaction can boost company reputation and attract talent, investment, and contracts.



The Important Components of Good Care Management

A truly effective care management policy is not developed in a vacuum. It requires close collaboration between the injured worker, the employer, insurance providers, and healthcare providers. While real world complexities and unique details of various injuries may require more nuanced and targeted implementations, the following are essential components that should be considered in effective care management approach:

- 1 Emphasize the importance of early reporting and respond promptly. In doing so, you educate your workers on the mutual benefits of early reporting and help them feel comfortable reporting all injuries right away. This will help prevent delays in treatment. To enable early reporting, however, employers must simplify and respond. Employers must simplify the method of reporting and make it intuitive and user friendly, be it via a 24/7 injury hotline number, digital reporting system, or some other means. Employers must also ensure prompt response to the reporting to further encourage this practice. Moreover, prompt response will prevent minor injuries from worsening.
- Utilize professional resources, such as third-party telephonic case management providers (Corvell, Axiom, WorkCare, etc.) or local Occupational Medical Clinics. While this is not required, it can be extremely helpful where it is feasible in the process of reaching the aforementioned outcomes. As a pracademic, this author has both seen the research and experienced the real-world benefits of this approach while leading care management in various organizations. When partnered with a telephonic case management provider, employees are given the provider's number and told to call it first for any non-life-threatening issue. The telephonic case management partner will triage the call and either provide over-the-phone treatment instructions or set up an appointment at the appropriate occupational clinic. If over-the-phone treatment is chosen, the telephonic case management provider will follow up the next day and the day after, or whatever intervals are necessary. If a clinic visit is needed, the telephonic case manager shares key details with the clinic to help the doctor understand the injury and its impact on the employee's job. The telephonic case manager keeps the employer updated to ensure everyone stays aligned and works together effectively. If a contract with a telephonic provider is not financially feasible, building a relationship with a local occupational medical clinic could be highly beneficial. An established relationship familiarizes the medical provider with your corporate culture, your level of engagement with and care for your employees, and any and all accommodations that you may be prepared to offer in the case of an injury. This important relationship can expedite availability of treatment for the injured worker and result in healthier and clearer goals and outcomes.
- 3 Clear care management protocols can provide clarity and set everyone's expectations from the start.

 These protocols may include set workflows for different injuries, clear guidelines for attending medical visits, and predictive analytics tools to spot high-risk cases early.
- Recognize the impact of organizational culture and provide a supportive environment for the injured worker with strong communication and collaboration. This will help workers feel like they are not alone in this process. The importance of maintaining regular contact between the injured worker, treating physician, and the employer cannot be overestimated. As stated above, accompanying the employee to any medical appointments shows care and helps to minimize fraud. Practicing discipline in the careful implementation of this step can also greatly minimize any negative impact on the employee's mental health.



- Consider the implementation of the stay-at-work initiatives when feasible. This option can support good workplace relationships and speed up recovery by boosting mental well-being. This measure can help spot and address worker issues early, preventing them from getting worse. To keep workers engaged, options include informal accommodations like flexible workloads or rest breaks, adjusting job demands, giving more control or rewards, and offering employee assistance programs. Developing a written "Stay-at-Work" plan can provide a reference document that all stakeholders can use throughout the process.
- Focusing on a proactive return to work benefits both the employee and the employer. In his book Accelerated Recovery, Dr. Howard B Cotler has a chapter on the Science of Post Surgery Recovery, in which he states that, "In order to return you back to health as soon as possible after your operation, it is important to get you out of bed, walking, eating, and drinking, and off of prescribed narcotics as soon as possible" (Cotler, 40). Dr. Cotler, backed by strong medical research, says that getting back to normal life quickly is the best way to recover faster. It is true in the medical field and should be considered in any holistic care management program. A proactive return-to-work focus helps employees heal faster—physically and mentally—by getting them back to routine sooner. It also benefits employers by improving business operations in several different ways.
- Look for job accommodation options, as finding an accommodation solution is typically better than lost time for everyone involved. Employees stay engaged and recover faster, while employers maintain good relations and some control, which is lost when workers have extended time off. Job accommodation can fill the gaps between the injured worker's temporary reduced capacities and the job demands. This decision is usually initiated by the employer and reached in collaboration with the injured worker, supervisor, attending physician, and if necessary, the insurance providers. In general, job accommodation needs to be flexible, creative, safe, personalized, temporary, and based on the worker's capacities, workplace challenges, etc. Senior management must support supervisors by giving them flexibility and allowing them to choose the needed accommodations to ensure the success of the return-to-work process (Durand, Corbiere, Coutu, Reinharz, and Albert, 2014). Senior management support and backing is critically important here and may come in the form of offering more flexible work schedules, temporary reductions in the department's production requirements, etc. Finally, support from co-workers is equally essential in the success of this step.
- **Leveraging industry data in decision-making is greatly underutilized today.** While most track key metrics like TRIR, LTIR, and claim costs, many overlook other important data, such as average recovery times for similar injuries. While an internet search can provide the full list, here's a small sample of resources available in the United States:
 - Official Disability Guidelines by MCG Health mcg.com
 - MDGuidelines by ReedGroup mdguidelines.com
 - State Workers' Compensation Medical Treatment Guidelines
- 9 Wellness integration can include many different initiatives including ergonomic assessments, workplace safety training, human and organizational factors training, promotion of early intervention programs, like stretching and physical therapy, etc.



Mental health awareness and integration is closely tied to recovery speed and should be included in effective care management. While the connection between care management and mental health is not usually at the forefront of the safety professional's mind, the implications must not be neglected. There is usually a strong correlation between the length of recovery and the negative impact on one's mental health. Sadly, most injured workers may not realize this (so sometimes they may push back), and many care management programs don't consider it. Van Horn's study on loss and depression after traumatic injury highlights key factors impacting mental health, including loss of independence, unachieved goals, decreased personal success, feeling less valuable, loss of pride, and reduced control over life. These factors lower self-esteem and can lead to increased anxiety and

The Impact of Non-Existent or Ineffective Care Management

depressive symptoms (Van Horn, 2009).

The impacts of non-existent or ineffective care management are significant. According to a 2016 study, participants from employers with non-existent or ineffective care management were 23.22 times less likely to return to work than those from employers with effective care management (Awang, Shahabudin, and Mansor, 2016). Additionally, participants whose intervention period exceeded five months were 41% less likely to return to work compared with those whose intervention period was within three months.

In fact, it can be argued that the impact and cost of ineffective care management is much greater to an organization than the cost of the initial injury. While not all incidents can be prevented, good care management is 100% within the organization's ability to deliver. There is no excuse for failing to prepare, execute, and follow through consistently and effectively in the area of care management.

What are the actual costs of ineffective care management? In addition to the stats above, medical care costs can rise sharply if employees use the emergency room as their default option. Second, without an effective care management program, there's a higher risk of fraud or misuse by both the injured worker and the medical provider. Third, there is the increased cost of worker compensation insurance when the employer takes a lackadaisical approach to care management. Fourth, a reactive approach to care can raise the employer's Experience Modification Rate (EMR), a 3-year risk rating used by insurers for workers' comp coverage. The higher the EMR, the costlier the insurance premiums. A 1.0 EMR is average — lower means a safer workplace and lower premiums, while higher means more risk and higher costs. Additionally, an EMR of greater than 1.0 can result in more difficulty with qualifying for lucrative contracts and/or outright rejection from the bidding pool.

Lastly, poor care management can harm an employee's mental health, making them feel ignored and unimportant to their employer. At the same time, they may be targeted by legal ads encouraging them to take full advantage of the system. The biggest issue is that only the attorneys benefit, while injured workers and employers lose. The injured workers may become depressed, have a tarnished reputation, and often end up losing their jobs, which can result in income interruption and impact relationships at home. The employer ends up in a costly legal battle they can't win, hurting profits and lowering morale among other workers.



How Effective Case Management is in Everybody's Best Interests

Effective care management, on the other hand, is truly in the best interest of all parties involved. The injured worker does not have to handle all the repercussions of their injury alone. There is a clear and well-defined process in place that guides them on what to do, what to expect, and what resources they can use. When the employer helps the injured worker to get to the clinic, accompanies the individual during their care, and is otherwise fully engaged, it helps the individual to recover faster and allows them to get back to work sooner. Feeling engaged speeds up their physical recovery while also supporting their mental health. What's often missed in past research is that a workplace injury can impact not just the injured worker's mental health, but their teammates' too. Good care management can help support the mental well-being of the whole organization.

It is understood that effective care management is also good for the employer. The frequency and severity of the injuries tend to go down. The willingness to report injuries tends to go up. The cost of injuries greatly decreases. This in turn decreases the cost of insurance and brings down the EMR, which results in more contracts, better opportunities to bid, and other reputational advantages.

Industry Example of Tangible Results from Effective Care Management

Leveraging strong care management and safety leadership to handle both short- and long-term conditions helps reduce injury severity and creates a more productive workplace (M. Couch Daniel, 2016). ExxonMobil Global Services Company (GCS), a subsidiary of ExxonMobil Corporation, employing 9,000 workers and over 12,000 full-time equivalent contracted personnel, discovered that a switch to more holistic care management resulted in employees no longer being hesitant to report injuries. Additionally, workers came forward earlier, particularly in chronic musculoskeletal cases before their conditions became severe or debilitating. This shift in approach was a significant contributor to minimizing the total number of OSHA defined recordable injuries by 65% between 2010 and 2014. During this same period, the total number of injury incidents reported by workers actually increased by 20%.





Conclusion

In summary, this paper reintroduced the concept of return to work or case management arguing for its equal benefit for the employee and the employer alike. This work also argued that it may be time for the upgraded nomenclature from case management to care management to fully reflect the holistic approach encapsulated within this area. Finally, mental health is often more impacted than physical health by workplace injuries, and a comprehensive care management approach can make a significant difference.

For questions about robust return-to-work principles, or contractor management solutions and services, reach out to a Veriforce expert.

CONTACT US

About the Author

Simon Goncharenko, PhD, CSP, CSHO

Simon Goncharenko (PhD, CSP, CSHO) is Head of Expert Services at Veriforce, LLC, and member of the Veriforce Strategic Advisory Board. He is also a Professor at Liberty University. Having been born and raised in Eastern Europe, Simon's 30 years of p rofessional experience has seen him lead teams on three continents and in various industries, including oil and gas, construction, and data centers. His most recent employment prior to Veriforce was with Meta Platforms, Inc., formerly Facebook, where Simon



supported the construction of multi-billion-dollar hyperscale AI data centers. Dr. Goncharenko has authored or contributed to over 80 articles, including in the ASSP's *Professional Safety Journal*, and 6 books, including *Save Lives: Pushing Boundaries in Human Factors*. The companion training to the book, entitled *Save Lives Global Human & Organizational Factors®*, has been widely popular with hundreds of management and frontliner participants around the globe. The book and training above have also morphed into a global initiative – Save Lives Global – that trains, consults, and advises corporate and government stakeholders in strategies for safer working outcomes (savelivesglobal.com). Simon is an animated and engaging master trainer, charismatic keynote speaker, and podcaster of the *Save Lives Global Podcast*.



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