

## The Abilita Program

The Abilita Program is a structured Biopsychosocial Rehabilitation system using self-report questionnaires to identify and measure baseline psychosocial risk factors; a post intervention Impact measurement is conducted to document change. It uses an online platform to deliver the questionnaires and the reports prepared from participant responses.

Case Managers use the Triage tools and Rehabilitation Consultants are trained to undertake the assessments, use the reports, and to deliver self-management skills coaching applicable to either physical or psychological injury/illness.

The program has been deployed in Worker's Compensation jurisdictions in Australia and New Zealand; Motor Accident Compensation in Australia, NZ and Malaysia; Disability Support Pension schemes; Military Compensation; Department of Defence and Income Protection Insurance.

The accumulation of data provides an opportunity to measure change in psychosocial risk factors, and to monitor the relationship between those changes and return to work and community outcomes. Abilita derives its success from its foundation principles of evidence-based, collaboration, measurement and empowerment. The benefits to all parties include:

**Claimants** Gain insight into influential BPS factors and are motivated to build self-help skills.

- Achieve optimal health and work outcomes.
- Report strong satisfaction with services provided.

**Case Managers** Build a relationship of trust with claimants.

- Obtain an indication of the best intervention pathway for each person.
- Gain confidence in time and cost predictions for each claim because of structured nature of assessment and coaching.

**Health and Rehabilitation providers** gain critical assessment information from the reports.

- engage with claimants on intervention planning and have them commit to self-help skill development.
- Use online resources to support service delivery.

**Management** can be confident that:

- A standardised, and authentic biopsychosocial process is in place to detect all potential disproportionate outcome claims early, and to manage all claims appropriately to achieve best outcomes.
- Risk factors and changes as a result of intervention are measured and recorded.
- Time and cost predictions for each claimant are more accurate.
- Outcomes data are measured according to case manager, service provider and service type. A claimant satisfaction survey is also included.

### Abilita biopsychosocial process

- In an early conversation, Case Managers advise claimants that they would like to understand how the injury/illness is impacting their life. They ask a small number of questions, and the total score provides a recommendation on the need for an Abilita Assessment. This is the Triage tool.
- If assessment is necessary, a Rehabilitation Consultant asks the claimant to complete the confidential, online, self-report questionnaire.
- This generates an immediate report which may be shared with the claimant and other service providers.

- The Initial Report interprets responses into biopsychosocial domains that are readily understood by claimants. They take ownership of the report because it is based on their own responses, and the **domain chart** assists them to reframe how they see their injury, its consequences and potential management.
- Using the Initial report, the Rehabilitation Consultant, with the claimant, plan the actions that will support them to regain the physical and psychological capacity to resume usual daily activities including work.
- Rehabilitation Consultants use both the Initial and Profile reports to implement tailored self-help skills coaching to each client. The Profile report offers additional response detail revealing the claimant's beliefs and behaviours that are either enablers or barriers to recovery.
- On completion of the intervention, the claimant completes the questionnaire again and an Impact report is generated which compares scores and domains revealing areas of progress.
- Progress measured in the Impact report is evidence of the independence and empowerment that the claimant has achieved. They take ownership of their achievement, and the certifying medical practitioner has evidence of their progress and readiness to work.

## **Questionnaires**

### **Triage**

The **2 triage tools** establish whether an Abilita assessment is necessary. The triage questions may be asked during an early face to face or phone conversation with a claimant.

- **AB-5** for physical injury (comprises 5 questions).
- **AB-7** for psychological illness or injury (comprises 7 questions reflecting impact of BPS factors, not severity of psychological symptoms.)

The **Assessment questionnaires** identify and measure factors that are known to influence delayed recovery and persistent disability in different health conditions

### **Physical conditions**

The Abilita Rehabilitation Index for Musculoskeletal injury or illness (**ARI.MSI**) is the original Abilita questionnaire and primarily applicable when pain is present.

The **Abilita Pain Questionnaire (APQ)** is now available. It was developed as refinement of the ARI.MSI, it is quicker to complete yet also provides a report with detail relating to the key BPS domains.

### **Mental Health**

The **ARI.PI** for psychological injury and illness and uses the same format as the ARI.MSI. It identifies and measures the BPS elements associated with mental health claims.

MRI.MSI and ARI.PI have been used in many jurisdictions but primarily in Workers Compensation jurisdictions in Australia and NZ.

### **Chronic Health conditions**

The Abilita Health Survey (**AHS**) screens the key BPS factors that influence the behaviour of poor work and community participation in the presence of other persistent health issues.

### **Work Participation**

The Abilita Work Life Survey (**AWLS**) is applicable to employers wishing to identify the BPS factors that influence work absenteeism and presenteeism.

## **Training**

Abilita Services offers online training courses to support the use of Abilita triage, assessments and self-help skills coaching. Onsite workshops are customised and delivered when requested. Course details are available at <https://abilita.talentlms.com/index>

## **Pilot Projects**

This is a summary of pilot projects within Workers' Compensation, and their findings.

### **a) S.A. Government – Capability Building**

In 2009, Abilita Services was contracted by the Department of Premier and Cabinet, S.A. to participate in a project to build capability within the Injury Management service of a selected agency.

The project involved training, for 22 Claim and Injury Management personnel, in the Biopsychosocial approach and Abilita Assessment, plus Abilita Coaching training for 8 of those IMA's. Participants evaluated the training highly particularly regarding understanding psychosocial assessment and value to their daily work.

43 injured workers participated in the project. The Project organiser reported that the initial ARI results supported 'the face validity of the tool in that the scores appeared to accurately reflect the level of functioning of the work injured employee'.

The Project results showed a strong relationship between reduction in ARI score (average 51%) and increase in work capacity demonstrated by reduction in weekly compensation payments of 54%.

### **b) S.A. Government – Complex cases**

In 2010, Abilita Services was the successful tenderer for the SA Government: "*Intervention for complex workers compensation claims in the SA Public Sector using a bio-psychosocial approach.*"

The Project objective was to apply a structured bio-psychosocial approach to achieve:

- 1) Improved and durable return to work outcomes.
- 2) A significant reduction (over 25%) in Income Maintenance Payments (IMP).

Participating injured employees had been diagnosed with a variety of physical and mental health conditions and had Duration of Claim (DoC) ranging from 8 weeks to 490 weeks (the mean DoC was 90 weeks and median 54 weeks).

Participants completed the ARI.MSI or ARI.PI at initial appointment, post coaching and again 6 or more weeks later to measure durability of gains. Coaching was conducted by a Rehabilitation Provider whose staff had completed Abilita Coaching training.

This 'complex cases' project provided valuable lessons regarding the implementation of a structured BPS program, including the importance of utilising triage tools (hence development of AB-5 and AB-7) to ensure CM confidence in selection of claimants.

The project was completed in 2012. Both objectives were successfully achieved and reflected in the average reduction in ARI scores of 28% and the reduction of IMP of 37%.

### **c) Department of Defence**

The Department of Defence implemented a pilot project in 2014 designed to identify cases of Apparent Disproportionate Outcomes (ADO) and to significantly reduce both the cost of treatment and time off work. The methodology they chose was to implement a structured biopsychosocial program including staff training, and prescribed case management and rehabilitation processes including: a triage protocol, Abilita assessment, and Abilita self-help coaching for the selected participants. Coaching was conducted by a Rehabilitation Provider whose staff had completed Abilita Coaching training.

60 injured employees were selected to participate in the project. Most participants had long standing conditions and work incapacity. 53% had a primary psychological condition and the majority of remainder had neck, back or upper limb conditions.

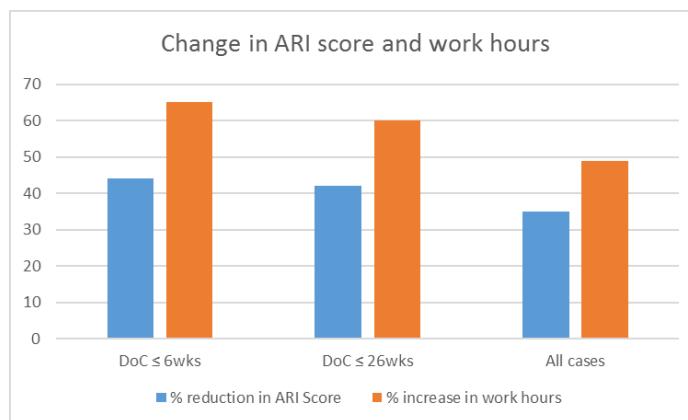
The outcomes report prepared by the Department revealed strong RTW outcomes with 'less than average' rehabilitation program costs for these complex cases; concluding that the Department should expect their panel of Workplace Rehabilitation Providers to incorporate such an effective and proven BPS model in their service delivery.

### **Abilita Research**

Abilita Services continually undertakes database analysis. The total data comprises cases that range in DoC from 2 weeks to 20 years. The Impact results for the total dataset confirms the significant benefits of early intervention.

- Cases assessed within 6 weeks of injury achieve an average of 44% reduction in ARI score.
- Cases assessed between 6 and 26 weeks achieve average 42% reduction.
- The average for the total cases is a reduction of 34%.

The chart below shows the correlation between reduction in ARI score and increase in work hours for those cases with capacity to increase work hours (ie. excluding those in full hours at Initial assessment).



Once enough data was accumulated, research, undertaken through LaTrobe University, confirmed the reliability and validity of the ARI.MSI. Details were published in the peer reviewed journal 'Work'; **Garton, Murphy, O'Halloran "A practical tool to improve outcomes in Work Injury Management" Work 53, 2016.** This research program is continuing as the basis of Pam Garton's PhD studies, and will achieve documentation of the evidence and outcomes supporting this structured biopsychosocial approach.

### **Summary**

The Abilita Program has consistently and successfully relied on its four founding pillars; Evidence-based, Collaboration, Measurement and Empowerment.

The program is based on the evidence that

- A person's beliefs and behaviours are critical to their recovery from injury or illness.
- An injured or ill person will collaborate with assessment and intervention recommendations when they trust and believe that these are in their best interests.
- When a person accepts the biopsychosocial nature of their condition, they are motivated and willing to learn and adopt self-management skills and strategies.

- Empowerment to reduce the impact of injury or illness enables a person to resume usual activities including work, to minimise re-injury, and to regain the satisfaction of independence.

This approach to Injury Management is empowering to both claimant and claims personnel, and it delivers the optimal outcome in a contained and predictable timeframe.