INDUSTRIAL INJURY: THE PRACTICAL NEED FOR EVALUATION OF CAPABILITY*

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In any discussion of rehabilitation, one must adhere to the premise that there is no substitute for earning capacity. It therefore becomes the moral responsibility for all who deal with the injured individual to protect and increase his earning capacity. A financial settlement cannot adequately protect him. The false sense of security of x dollars for y number of weeks will not protect him. The greatest protection of his security lies within his own capabilities and in his own ability to exploit himself.

Once a man has suffered a disability he forfeits his position in the world he knows as it moves on ahead of him. How far he lags behind will depend upon the severity of the injury, his psychological make-up, and what tow-ropes are available to

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which he can cling so as not to be left so far behind that he cannot catch up.

We have highly specialized centres for the severely disabled and many sources for treatment of minor injuries, but comparatively few sources for complete physical treatment designed for people with moderately severe injuries who anticipate returning to their previous occupations or some modification of their normal employment. It must be emphasized that for every severely injured patient requiring total rehabilitation there are at least 50 requiring extensive and intensive medical rehabilitation. These are frequently forgotten men. They are the ones who often suffer great loss and unnecessary permanent disability.

While medical rehabilitation includes the utilization of all branches of medicine, it should be understood that the references in this paper to treatment will be confined to restoration by utilization of conservative physical means. Actually, this communication is a presentation of the theoretical consideration: Should a practical realistic rehabilitation programme be established which will return the injured person to his former occupation or, failing in this objective, prove he is incapable of performing his former occupation?

In many instances it becomes the responsibility of a physician to determine whether the injured is employable. It is common for the physician to state that the patient can return to work while the patient insists that he is incapable of fulfilling the job requirements. It must be recognized that there are numerous extraneous factors which influence these opinions. In many instances these factors are intangible and stem from psychological influences. Some of the psychic influences on the patient are feelings of insecurity, fear of discharge for non-performance, fear of a second similar kind of injury, and depression from prolonged inertia and defeatism. Only too frequently the physician's statement of work ability is as subjective as the patient's complaints.

It must be recognized in evaluation that an individual with a given disability may be able to perform under certain working conditions and fail completely in a different working situation. Consequently it is common experience for him, upon being returned to work, to find himself actually incapable of performing an average day's work.

Unless the physician is aware of the total requirements of the work situation and is fully cognizant of the capabilities of the injured person as applied to that particular work situation, it becomes impossible for him properly to evaluate employability. Therefore in determining when an individual should return to work the physician must estimate and evaluate the following points: (1) The individual's subjective complaints, (2) the degree of disability, (3) the nature of the injury, (4) the requirements of the job, and (5) the individual's true working capacity.

From the point of view of the injured person, light work is any job which he can perform within the limitations of his abilities, and which is not as physically demanding as his normal occupation. Therefore, by nature of this definition, light work will vary according to the type of injury. For example, with a leg injury, light work would consist of any type of activity of the upper extremities, with various restrictions of weight bearing. Another example of light work would be, with an upper-extremity injury, work activity requiring the use of the opposite uninjured upper extremity or possibility limited activity of the injured extremity. With a back injury it may mean work modifying or restricting the amount of stooping or lifting involved.

It is obvious that each situation will have to be considered on its own merit. If the employer is a large concern that can provide work with a variation in physical demands, the injured person frequently can be readily fitted into the organization. A small organization may find it more difficult to find suitable activities.

There is only one fundamental question involved in considering the need for rehabilitation: Will the treatment be of benefit to the injured? But the determination of both the extent and the quality of the treatment is usually based upon the recommendation of a physician, just as it is frequently the physician's responsibility to determine employability. With few exceptions the recommendation for specialized treatment must come from a physician, who is not in a position to provide that treatment himself.

The main reasons why the injured person fails on attempting to return to work are as follows:

1. There is no such thing as modified or light work unless the employer desires it.

2. There has been improper general reconditioning, especially where there has been prolonged disability. It is a fact that when an injured man has been off work longer than a few weeks he becomes deconditioned. He must be reconditioned to become capable of performing a full day's work.

Sometimes there is an inadequate reduction of disability.
 The injured himself fails to recognize the need for modifica-

tion of employment.

Failure to carry over medical treatment during the initial weeks of re-employment results in aggravation of symptoms.

6. Fear of discharge for inability to perform leads to failure. The muscles used in work may be different from the muscles injured. The statement that work is the best treatment is frequently erroneous in that the work load may be excessive and non-specific and the muscles may decompensate under the strain. On the other hand therapeutic exercises for the involved parts do not recondition the body as a whole. Therapeutic exercises build strength but not endurance. The strength and endurance required can be accomplished only by a graded programme which is specifically designed to this end. This is especially true for older workmen.

A possible solution to the problem may be a centre for treatment coupled with a centre for evaluation of capability. Distinction must be made between this proposed capability-evaluation centre and a sheltered workshop. The sheltered workshop takes a person with a fixed disability and fits him into a protective work situation. The job is predetermined on the basis of the disability. On the other hand, the capability-evaluation centre can apply the principle of the sheltered workshop plus the purpose of a medical rehabilitation centre and have as its basic purpose reduction of disability and the building of endurance, general reconditioning, and evaluation of capability.

To be effective it is imperative that the programme should encourage function of the injured parts within the limitations of those parts. There must be job disciplines which approach those of a true working situation. There must be cooperation and consideration both by and for the injured.

There are many persons who are capable of 2, 4, or 6 hours work, but not of 8 hours continuous work at productive labour. By controlling the work situation, in time and in nature, the individual's work capacity and endurance could be more effectively determined. From the psychological point of view it is important that the work should be of a productive nature, for this would demonstrate to the individual that he is capable of gainful employment. Productive work would also serve to reindoctrinate him into a working situation.

Although it is of course impracticable to duplicate all types of occupations, nevertheless, if sufficient graduations of work level could be provided and work disciplines maintained, the programme principle would have the prospect of success.