• Tooele Chemical Agent Disposal Facility (TOCDF)
  - First chemical weapons destruction facility in U.S.
  - Plan and implement the destruction of chemical weapons and secondary waste that is safe, secure and environmentally compliant for workers and the public
• TOCDF MEDICAL CLINIC
  - Staffing
    • Two physicians
    • Four Physician Assistants
    • Twenty F/T paramedics
    • Occupational Health Nurse
    • Laboratory Technician
    • Support personnel
• TOCDF DEMILITARIZATION SUPPORT
  - Surveillance examinations
  - Annual physical examinations
  - Response to agent and non-agent emergencies
• TOCDF MEDICAL CLINIC MISSION:
  - To effectively and efficiently manage employee injury/illness, regardless of circumstance, to contain costs, enhance productivity and support the safety and well-being of each employee
• EMPLOYEE RESPONSIBILITY TO ABSENCE/DISABILITY MANAGEMENT
  - Expected to report all work and non-work related illness or injury to immediate supervisor and to medical clinic in a timely fashion
• MANAGERS AND SUPERVISORS
  - Document work-related injury or illness on Accident / Injury Report form
  - Participate in CMG “Fitness for Duty” meetings to review employee status
  - Follow-through with employee “Return to Work” plan
MEDICAL DEPARTMENT COMPONENT

- Evaluates and treats all work-related injuries or illness
- Evaluates and provides emergent care for work and non-work related injuries/illness
- Inquires of all injured/ill patients of work or non-work relatedness
- Clinicians consult with Medical Director regarding treatment options
- Determines work status based on specific job requirements and on outside consultant recommendations
- Communicates work status to employee’s supervisor and to Safety Manager
• CASE MANAGEMENT GROUP (CRG)
  - Convened by Medical Director or Occupational Health Nurse (OHN)
  - Comprised of the following key personnel:
    • OHN
    • Medical Director
    • Safety Manager
    • Human Resources
    • Employer Worker’s Compensation Provider
    • Off-site clinicians
    • Other personnel as required
• CMG RESPONSIBILITIES
  - Determine appropriateness and necessity for outside medical consultation
  - Facilitates required care for injured/ill employees
  - Communicates to on-site departments regarding employee’s fitness for duty, work limitations and work modification requirements
• CMG RESPONSE
  - Involvement commences at the time of incident reporting or prior to planned leave
  - CMG notification is expected to occur in a timely manner following initial treatment
  - Conducts thorough and objective assessment of patient’s current status
  - Assesses immediate case management needs and develops plan forward
CASE MANAGEMENT ACTIVITIES

- Coordination of a plan forward with the Worker’s Compensation provider
- Communicates the plan forward with patient and immediate supervisor
- Provides appropriate education to the patient
- Identifies community resources and referrals
- Facilitate communication between management and patient
• CASE MANAGEMENT ACTIVITIES CONT.
  - Evaluates and monitors process components
  - Monitors treatment of internal/external providers
  - Documents patient assessments and needs, plan forward, actions completed and current patient status in the medical record
• CASES MANAGED
  - Injury/illness is work-related and OSHA recordable
  - Injury/illness is work-related and a first aid case that may evolve to an OSHA recordable case
  - Injury/illness is non-work related, but impacts assigned work duties
  - Injury/illness that results in time away from work
  - Pre-existing injury/illness that is or could be aggravated by work duties
  - Functional Capacity evaluations are needed
• PATIENT INJURY RECOVERY PLAN
  - Referral to Outside Healthcare Provider
  - Work site evaluation
  - Ergonomic evaluation
  - Follow-up and subsequent treatment by TOCDF clinicians
• RETURN TO WORK PLAN
  - Coordinated with Human Resources and the patient
  - Development of modified duty program as required
  - Communicated to case participants
• PATIENT CONFIDENTIALITY
  - Case management records are maintained and safeguarded with established codes of ethics
  - Comply with legal or regulatory requirements to assure confidentiality of health information
• CASE MANAGEMENT EXPANSION
  - Thirty-six cases opened in 2005 and in 2006
  - Ninety-seven and 149 cases opened in 2007 and 2008 respectively
  - Two hundred eighty cases reported in 2009
  - Increase attributed in part to the addition of the following:
    • Sub-contractors
    • Long-term disability personnel
- Efficient employee case management and the “Return to Work” process have contributed to effective cost management, enhanced productivity and employee safety / well-being

- Contributors to successful management of employee illness/injury
  • Early CMG intervention
  • Improved communication
  • Increased oversight of sub-contractor work and non-work claims
MANAGED TOCDF INJURY / ILLNESS CASES
OSHA Recordable Injury/ Illness Rate
1995-2009 YTD
One case in each of 2007 and 2009 presented a substantial portion of the total expenditure for each year ($53,464 and $29,590 respectively).

Forty-seven cases from 2007-2009 were treated at the TOCDF Medical Clinic and did not incur additional expense.

All cases resulted in no lost work days. As of 5 March 2010, TOCDF worked 9,000,000 man hours without a lost work day.