재활정책

게시일시 및 장소: 10월 19일(토) 08:30-12:30 Room G(3F)

질의응답 일시 및 장소 : 10월 19일(토) 11:00-11:30 Room G(3F)

P 3-40

# Effect of Work-hardening Program for Injured Workers in Worker's Compensation Insurance

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# **Background**

Work-hardening program have been developed and implemented in order to reduce duration of work disability and facilitate returning to work in worker's compensation insurance since 2013. The efficacy of work-hardening program has rarely been proven using patient medical record in Korea. The analysis of the medical records can confirm not only the effectiveness of work-hardening program but also how the program affects injured workers specifically.

## **Purpose**

We retrospectively collected and analyzed the Functional Capacity Evaluation(FCE) records of patients who participated in work-hardening program at the KCOMWEL Incheon Hospital between January 1 and December 31, 2018 in order to examine the effects of the program on the patient's physical, psychological, and work-related outcomes: body functions, the readiness for return-to-work, and job performance capacity.

#### Methods

The subjects of this study were selected from the patients who participated work-hardening program and had pre- and post-test of FCE in KCOMWEL Incheon Hospital between January 1 and December 31, 2018. Fifty seven patients with injuries on lower extremities(42.2%), upper extremities(31.5%) and back(17.5%), and complex(5.3%) were included and 8-week or 12-week program was provided. We analyzed using electronic medical record(EMR) data and analyzed changes in body functions, the readiness for return-to-work, and job performance capacity level before and after the program. <br/>
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#### **Results**

The significant improvement was found in basic physical functions, such as agility, balance and flexibility, but not in endurance. The results of the job performance capacity evaluation showed that patients were most likely to use lift and bilateral carry motion. And The significant improvement was found in strength and time required for the task.

The score of the dimension of "Prepared for action-Self-evaluation" in the readiness for Return-to-work (RRTW) scale significantly increased. It means that patients felt more ready to go back to work and acquried more strategies to make work manageable after returning to work.

## Conclusion

The effect of work-hardening program for workers with work-related injury was proven partially in physical, psychological, and job performance capacity. The program should be improved to increase patient's endurance in basic physical functions and consider RRTW stage-specific psychological intervention.

Acknowledgment :This study was funded by Korea Workers' Compensation and Welfare Service

Table 2. Statistical Analysis of Body Function Assessment

Variables			M	SD	t	P
Dexterity assessment: Side	Y-1 1.7.Y	pre	9.55	3.89	-7.712	.000*
step (number of times)	1st trial	post	12.45	3.90		
	0.1.11	pre	9.84	4.01	-7.559	.000°
	2nd trial	post	12.86	3.73	-1.559	.000
	14	pre	9.88	4.02	7.750	000
	result	post	12.95	3.83	-7.750	.000
equilibrium assessment: Closing eyes and standing with one foot (s)	lst trial, left side	pre	4.17	5.10	-1.954	.05
		post	6.80	10.19		
	1st trial, right side	pre	4.48	5.03	-2.533	.014
		post	8.81	14.25		
	2nd trial, left side	pre	5.54	8.70	-1.197	.23
		post	6.51	9.65		
	Out and the state	pre	6.48	12.28	-2.470	.017
	2nd trial, right side	post	8.72	13.19		
	result, left side	pre	6.29	8.82	-1.937	.05
		post	8.04	10.85		
	result, right side	pre	7.26	12.25	-3.119	.003
		post	10.84	15.29		
Flexibility assessment: Sit and reach (cm)	lst trial	pre	2.16	8.81	-6.122	.000
		post	7.32	8.06		
	2nd trial	pre	2.94	9.27	-6.031	.000
		post	8.38	8.11		
	00200 <b>1</b> E	pre	3.21	9.05	-5.820	.000
	result	post	8.41	8.07		
Endurance assessment:	resting pulse rate	pre	75.19	10.76	449	.65
Max weight up and down stairs		post	75.77	10.33		
	pulse rate after assessment	pre	111.98	18.03	.095	.92
		post	111.73	16.30		
	Maximum oxygen level(%)	pre	95.89	9.88	634	.53
		post	96.27	9.67		

<sup>\*</sup>p < .05, \*\*p < .01

Table 4. Results of Each Job Performance Assessment

	Variables					SD	t	P
Simulati on	lift	from floor	maximum weight (kg)	pre	21.331	8.9067	-6.950	.000°
Tasks				post	25.498	8.5219	0.000	
action assessm ent bilateral carry	to waist	maximum	pre	7.69	1.104	1.000	.323	
		from floor to shoulder	strength	post	7.49	1.502	1.000	.34
			maximum weight (kg)	pre	15.868	7.0663	-3.640	.002
				post	19.227	7.5924		
			maximum strength	pre	8.00	.949	1.195	.24
				post	7.67	1.390		
		flat/ramp	maximum weight (kg)	pre	17.302	8.9220	-8.215	.000
	carry			post	22.000	9.3477		
			maximum strength	pre	7.80	1.453	2.287	.028
				post	7.29	1.601		
position	working	working standing	scores MTM(%)	pre	135.04	15.501	-1.964	.06
	position			post	137.52	16.065		
		upper scores MTM(%)	pre	113.91	16.667	-2.366	.024	
	level reach	post	117.15	12.823				
		stooping scores MTN	scores MTM(%)	pre	118.13	23.129	-2.179	.03
	reach	Scores WIIWI(90)	post	121.47	21.454	2.113	.00	
		arauahina	gaores MTM(%)	pre	108.95	26.871	-2.557	0.18
		CLOUCINING	scores MTM(%)	post	112.14	27.675	-2.551	0.10
	transfer			pre	78.2031	35.93057		
	walking climbing stairs	walking time(s)	post	61.2242	25.79269	-8.215	.000	
		climbing	()	pre	39.6238	32.68788	0.007	000
		stairs	time(s)	post	31.9929	21.69568	2.287	.02

<sup>\*</sup>p < .05, \*\*p < .01

Table 5. Statistical Analysis of Readiness for Return-To-Work(RRTW) Scores

Variables			M	SD	t	P
RRTW (Scores)	Precontemplation (PC)	pre	1.6551	.70696	.548	.586
		post	1.5965	.82107		
	Contemplation	pre	3.1170	1.26736	.770	.445
	(C)	post	2.9768	1.29735		
	Prepared for Action—Self evaluative (PAS)	pre	2.9353	.88756	-3.090	.003**
		post	3.3628	1.06984		
	Prepared for	pre	3.4268	.90145	-1.937	.058
	Action-Behavioral (PAB)	post	3.6839	.96497		

<sup>\*</sup>p < .05, \*\*p < .01