

Tap Into Your Patient Base

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This month's occupational health interview features Ms. Elizabeth Appl, executive director of the nonprofit International Academy of Occupational Health Consultants (IACOHC) and executive advisor to the Council on Occupational Health of the American Chiropractic Association (ACACOH).

Briefly share how you became interested in chiropractic and its role in occupational health and applied ergonomics?

The first full-time job I held was as a receptionist at a debt collection bureau. I was the first person to greet guests. One day, a particularly irate man stormed my workplace wielding a baseball bat as a weapon. At once, the office manager reached inside her desk drawer, withdrawing her own weapon. Now standing sandwiched between him and her, it took but a second to solidify my passion that people should be able to work in a safe environment.

That was two years after the 91st Congress passed the law known as the Occupational Health and Safety Act of 1970 (OSHAct), declaring purpose and policy pertaining to human rights for safety and health at a place of employment. Violence at work may not have been as prevalent or well-documented then as it is today; the Bureau of Labor Statistics (BLS) reports that in 2005, 5 percent of the 7.1 million workplaces in America experienced at least one incidence of onsite violence.¹ Do some math and that statistic becomes important.

A later event set the stage for chiropractic to play a significant role in my life. It was during a time of many surgical procedures. Already familiar with chiropractic care, I learned during that time about how chiropractic, founded upon the principle of prevention, could positively impact workplace injury incidence and cost-containment specifically pertaining to neuromusculoskeletal injuries. How often life experiences set the stage for how we will play out our professional lives. Everything I do surrounds safety for the general public in a broad sense, whether in the arena of occupational safety or emergency management.

What is the IACOHC and what range of services does it provide to the profession?

The IACOHC is a nonprofit chiropractic organization established in 1983. Its mission is "fostering public health and safety through education, ergonomics, optimal clinical management and other measures." Doctors of chiropractic who are either interested in becoming or already are involved at any level with providing an array of wellness or occupational health and safety services to business and industry will find value in the IACOHC as a source for news, information, professional resources, networking options, and educational and training opportunities.

The IACOHC publishes a periodical newsletter for its members that includes trends, statistical data and studies pertaining to workplace safety and health issues, substance misuse and abuse in the workplace, and just about any other relevant information including stories about individual DCs working with industrial clients. Resources are available through the IACOHC that assist the DC in either marketing to or working directly with local employers. The products available through the organization are only those that have a proven history of truly assisting clinicians working in this

specialty.

There is a definite need for tools (often hard to find) to assist chiropractors in communicating or working with industrial clients. Which resources have DCs found to be most practical and useful?

What's occurring for this profession today is that industry is calling "out of the blue" for the local DC to come talk with workers about responsible safety and preventive health considerations. This has not always been the trend - it wasn't long ago that a DC could anticipate doing some serious marketing for about two years before gaining the attention of even one local employer. DCs are really caught by surprise when they get that call; they find themselves unprepared, not knowing what to do or having the tools in hand.

Employers also want a baseline established before hiring and want to know that people are smartly placed in jobs with minimum risk potential. Since 70 percent of workers in America make their living while seated for extended periods of time, chiropractic can serve industry well by educating supervisors and employees to identify the physical stresses associated with seated work, detect injury early and assist them in implementing prevention strategies as breaking from work, warm-up and stretching exercises.

That's where the IACOHC comes in. The organization provides resources regarding the basics the DC would want to know before pursuing business and industry; information on performing pre-placement (following a job offer) physical screenings for lower spinal injury prevention; and ways to provide ergonomic solutions to seated workers.

How important is the role of the doctor of chiropractic in workplace health and wellness?

Hugely important. Wellness is a booming industry - an open market. According to the BLS, in this decade jobs in the fitness and recreation sectors will increase by nearly 30 percent. The same growth is estimated for jobs within the broad medical field. American workers are aging, there's more obesity (including among our youth - the next generation of working adults), and the plague of stress and other health problems take their toll.

Life is hectic and we don't make time to eat healthy foods or exercise; rather, we grab "quick-fix" food from the superstore shelf or fast-food restaurant to eat in front of the television. Consequently, the chronicity and prevalence of heart disease and related cardiovascular conditions continues a near 80-year path as the leading cause of death in America. The National Diabetes Clearing House has posted on its Web site that 7 percent of the total population suffers from diabetes; 9.6 percent of all people over age 20 have diabetes. That's a lot of suffering and loss. We spend our days inside the four walls of work or school. What better places than these to deliver a plethora of wellness services?

There are DCs making strong headway as change agents for getting nutritional food choices and juices rather than sodas in vending machines. Fred Rashcke, DC, president of the American Chiropractic Association's Council on Occupational Health (ACACOH) is such a change agent. He's working with the school district in his community for healthy options for kids - educating them while they're young. Chad Henriksen, DC, DACBOH, is yet another. Dr. Henriksen really is a trendsetter for delivering a vast menu of onsite wellness options to workplaces.

You've been passionate about positioning the chiropractic profession at the frontlines in the war against substance misuse in the workplace. You've also mentioned education as being one way the IACOHC is able to fulfill its mission. What opportunities exist in this regard for DCs?

The IACOHC has worked hard to place many clinicians and their staff at the very forefront of being

service providers for workforces regulated by the federal guidelines found in Book 49 of the *Code of Federal Regulations* Part 40 (CFR 49 Part 40). "The Part" sets forth policy pertaining to all parties included in the Department of Transportation (DOT) drug and alcohol testing industry, be they employers, employees, testing laboratories, technicians or service agents, or administrators. A DC meeting the federal requirements for training and proficiency will be qualified to perform DOT drug and alcohol services. Likewise, trained clinical staff will qualify.

Indeed, I am passionate about clinicians understanding the impact substance misuse has on our nation, particularly the socioeconomic nemesis it is for employers and the solutions available in countering the toll substances take on lives. (I define substance misuse as "the unsafe use of alcohol and/or illicit drugs whereby the safety, well-being and health or all these things are jeopardized for the user and/or others and may involve the risk of damage to property."²)

Why should DCs get involved in drug and alcohol testing? If not because they are professional health care providers, then because we all are impacted by the devastations of substance misuse by those we care about. It's everybody's war against what the National Institute of Drug Abuse (NIDA) and the National Council on Alcoholism and Drug Dependence (NCADD) refer to as a "major health problem" and "an economic burden." More than 15 million adults have alcohol problems and millions have illicit drug use problems, of which 70 percent are employed. Nearly 50 percent of the adult population in America has a history of alcoholism or problem drinking.³

Employers take an aggressive approach to countering misuse and addiction either by compliance to federal mandates for testing or by having a "drug-free workplace" program in place (for workers outside federal regulations). Often, alcohol and drugs go hand in hand in devastating lives. Chiropractic clinics nationwide can make a tremendous difference by providing drug and alcohol testing services, as well as providing employers and patients with referral sources for intervention or treatment options.

Training and proficiency are available through the IACOHC via live classroom training (continuing education), one-on-one training or independent study. The IACOHC works with Northwestern Health Sciences University (NHSU) and state associations to get clinicians and staff trained. DCs who embark on the postgraduate (diplomate) chiropractic occupational health and applied ergonomics program will find this offering is available on DVD through NHSU, with CEUs counting toward diplomate status in the American Chiropractic Board on Occupational Health (DACBOH). I'm happy to answer any questions about substance misuse pertaining to workplaces and also questions about the best option for readers relating to meeting federal requirements for performing testing/screening.

Additionally the IACOHC provides drug and alcohol training for supervisors in workplaces regulated by the Dept. of Transportation. The 49 CFR Part 382.603 states that an employer "shall ensure that all persons designated to supervise drivers ... receive training" to be able identify indicators of probable alcohol and drug use. DCs can provide this as a service to local employers.

You also function as the executive advisor to the American Chiropractic Association's Council on Occupational Health. What value does this council hold for the profession?

Yes, I have been involved with the council since its inception. The ACACOH was established by the ACA in 1991 at the influence and urging of the founding professionals of the IACOHC. As you know, the ACA has a council for most specialties in the chiropractic profession. The ACACOH can be viewed as a support for the individual practitioner. It does this by working toward strategic alliances with governmental and other types of agencies, thus generating visibility and opportunity

for the council, its members and for the profession at large. The ACACOH shares sponsoring roles with chiropractic institutions for continuing education options.

In general, the ACACOH's leadership strives toward better positioning of chiropractic as the number-one choice for employers; this is only possible as employers and the general public become well-educated of the documented evidence of the efficiency and efficacy of chiropractic. Unfortunately, myths remain about chiropractic that need to be dispelled - this is a great challenge for the ACACOH. Fortunately, its leadership is strong in facing that challenge.

As with other ACA councils, this council is membership supported. In the past year, membership growth has been significant. Membership in the council results in benefits including a quarterly newsletter, discounted fees for council-sponsored seminars, mentoring services, and discounts off the resources available through the IACOH. Students enjoy complimentary membership while enrolled in a chiropractic college.

From your seasoned service to the profession and your passion for public safety and health, what insights or advice might you have for doctors interested in working with the chiropractic occupational health and applied ergonomics specialty?

First and foremost, get busy accomplishing the postgraduate (diplomate) coursework for this specialty, conveniently available on DVD format so doctors can complete coursework at their office or home. The diplomate program consists of a total of 360 hours. However, even accomplishing the first three sessions of the program will sufficiently assist the DC in getting a good start with local businesses. It is somewhat a "buy as you go" program with the option of purchasing portions at a time or the entire program. Obviously, the more accomplished, the higher level of success in industry one can experience. As mentioned, completing the entire program (including exams) leads toward DACBOH recognition.

Second, and as important, is for the DC to begin building professional relationships in their community. Any accomplished leader knows the value of sharing a vision with supportive and like-minded people - those relationships pave the way to being able to do what you want to do. They are reinforcing, supportive and offer a way for the free exchange of ideas and innovation. Relationships are so important if we are to foster professional growth in whatever we do.

A common theme I hear from doctors is that they spend their every waking minute in the clinic; be encouraged that even a small investment of time for building relationships pays off in big dividends. So much of what we do for a living is generated as a result of the people we know. Invest by becoming part of the local safety council, get to know local business owners (because they all know one other) and create social time in your schedule. It's all so very doable.

Finally, resist giving away your services for free. Value what you do or it will be easily disposable. Business owners are service-driven people and they expect you to be, too. Without any exaggeration, the doctors who tell me about the services they provide for free (usually talking to employees about safety) in hopes of landing a contract, are the same doctors who, three years later, are frustrated because they haven't progressed beyond the freebies. We expect our lawyer or dry cleaner to bill us for their services, so why would any employer expect your services to be free? They don't. In regard to landing a contract - you don't need every company to contract with you; just the right one.

Do you have any other comments you would like to add?

Statistically speaking, 75 percent of America's adult population chooses a physician based on

advice from family, friends and co-workers. Consider that the female head of household makes about 95 percent of all health care decisions for family members. Nearly 48 percent of women work full-time outside the home or operate businesses out of a home office. This is a tremendous market for chiropractic to tap into. Tell your patients about the services you can provide to workplaces. Your patient base is literally your very best advertising vehicle. I leave you with my best wishes for success in this specialty field.

References

1. Bureau of Labor Statistics. *Survey of Workplace Violence Prevention, 2005*. October 2007. USDL 06-1860.
2. Auppl E. *Workplace Drug Testing and Alcohol Screening: A Major Role for Chiropractic*. DC Tracts. Data Trace Publishers, May 2005.
3. *Position Paper on Drug Policy, Physician Leadership on National Drug Policy (PLNDP)*. Brown University Center for Alcohol and Addiction Studies, 2000.

Contact Diana Berg or Jenny Bell at Northwestern Health Sciences University [(800) 888-4777, ext. 249] for details about the NHSU diplomate program in occupational health.

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