

Rehabilitation Management at Aspen

- a synopsis for brokers and clients

Rehabilitation at the centre of Claims Management

At Aspen, rehabilitation is at the centre of our claims handling philosophy. In order for us to successfully achieve outcomes, a number of issues need to be addressed:

- The co-ordination of a number of stakeholders.
- Medical and therapeutic interventions need to address injuries in the right order and within appropriate timeframes.
- Injured parties need to be motivated and made aware of the potential benefits.
- Employers need to be encouraged to participate in the process and adopt a flexible approach.
- The complications that can be put forward by the legal system need to be sensibly managed.

As liability insurers we aim to work with our clients to proactively manage these issues. We only use hand-picked specialist rehabilitation providers and case management agencies. Through the detailed guidance we produce, our claims handling agents are acutely aware of our desire to implement rehabilitation and the importance of early intervention. Through our own in-house expertise we monitor rehabilitation activity to ensure that best practice is consistently delivered.

The key stages of Rehabilitation Management at Aspen

1. Identification and verification of suitable cases

All incidents reported to Aspen will be considered against established guidelines to identify those cases which are suitable for rehabilitation intervention. This includes:

- Reviewing the facts of the case including the situation regarding liability.
- Severity of injury and whether a formal claim is anticipated.
- Whether rehabilitation is justified in cost terms against prospective benefit.

Accordingly our efforts focus on more serious injuries which are likely to lead to significant lost working time.

2. Initial needs assessment

Our specialist rehabilitation providers will arrange a face-to-face initial needs assessment with the injured party where medical and therapeutic needs will be established and a full rehabilitation programme proposed. The rehabilitation programme will:

- Estimate realistic timeframes.
- Assess the likely costs involved.
- Comment on achievable outcomes.
- Be communicated to all concerned parties.

3. The rehabilitation programme

Subject to approval the appointed rehabilitation provider or Case Manager will implement the plan. This will involve:

- The blending of a variety of techniques in order to achieve the required goals.
- Balancing the use of private and public sector services where cost, quality and time dictate.
- Planning an early and safe return to work and liaising with the employer.
- Maximising domestic independence.

4. Managing the complications of the legal system

The consideration of rehabilitation is now an obligation under the Personal Injury Pre Action Protocol. We aim to work under the Code of Best Practice which has been agreed by Insurers and bodies representing Claimants' Solicitors.

Whilst the prospect of early intervention raises the theoretical chance that a formal claim could be triggered, our experience suggests this is not the case. In many instances we have avoided formal claims by managing the process of recovery and seeking to avoid financial loss for the injured party.

5. Benefits and outcomes

- All costs are met under the Aspen policy.
- Substantial claim cost savings.
- Claim potential becomes manifest more quickly and settlement achieved earlier thereby reducing attritional claims costs.
- Valued employees can be returned to the workforce and substantial lost earnings claims mitigated.
- Many clients experience improved industrial relations.
- A high quality of life can be restored for most injured parties.

6. Working together

Aspen can advise how pre-existing schemes or rehabilitation arrangements can effectively work in conjunction with our own efforts.

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Case Study - an example of rehabilitation at Aspen Insurance

The injured person and his injury

- 44 year old works manager.
- Traumatically amputated dominant right hand.
- Immediate admission to a specialist NHS Unit where acute care included surgery to re-attach the hand through micro and plastic surgery.

The rehabilitation process

Within 10 days of the accident, the matter had been reported to Aspen.

- Needs assessment took place immediately upon discharge 10 days post accident.
- Case Manager commenced early liaison with the employer to keep the job position open and inform on the likely recovery pathway.
- In conjunction with the employer exploration of return to work alternatives commenced.

Case Management monitoring continued through wound and pain management programmes which were agreed with the hand surgeon. Six weeks post accident the orthopaedic pins were removed and physiotherapy to 'top up' NHS provision was provided privately. A private Physiotherapist designed a specific daily exercise programme to promote blood flow and improve movement.

Aspen believe we have savings in the region of £300,000 consisting of mitigated lost earnings into the future and additional aspects of future loss that would have featured should the matter have been pursued via the legal process from the outset.

After 15 weeks further soft tissue repair and plastic surgery was undertaken.

Outcomes

- Good blood flow and positive signs of sensation and function were returning.
- Terms were negotiated with the employer for a graduated return to work.
- Three months post accident the employee re-commenced work 3 half days per week whilst continuing occupational and physiotherapy during the remainder of the week.
- Whilst a functional disability remains he has experienced as close to an optimal recovery as could have been hoped.

The Case Manager looked at ways of ensuring the employee remained mobile and arrangements were put in place to adapt his car and pay for gym membership to further assist physical recovery.

- The employee was back at work full time on the same salary with slightly modified duties within 5 months of the accident.
- No wage loss.
- At present there is no formal claim from Solicitors.