

# Assessing Yellow flags for workplace injuries

Yellow flags are indicators of psychosocial, workplace and other factors that increase the risk of developing or perpetuating long-term disability. The presence of yellow flags should alert a clinician to address or resolve the issues early, preventing them from becoming entrenched and causing or contributing to poor or delayed health and return to work outcomes. If yellow flag risk factors are present a more detailed assessment of the patient should be undertaken.

## What are yellow flags?

Yellow flags generally occur when there are difficulties in the following areas:

Flag 1	Flag 2	Flag 3
<b>Personal, family and social</b>	<b>Workplace &amp; injured worker interactions</b>	<b>Workers compensation financial &amp; legal</b>
High levels of pain	Workplace environment (physical, safety issues, past safety record)	A dispute about the injury or cause of injury
Attitudes and beliefs about their pain and dysfunction (avoidance, fear of re-injury, catastrophising)	Interpersonal life and relationships at work (support, reaction to injury, return to work)	A dispute about income maintenance payments
Diagnosis and treatment	Specific return to work issues (availability of duties, industrial pressures).	Financial hardship
Emotional state eg, anxiety, depression, grief		Claim lodgement delays
Family/relationship difficulties		Lack of understanding of workers compensation eg, your patient or their employer misunderstands the compensation or rehabilitation process or the information provided

The following yellow flag risk factors have been known to predict poor outcomes for patients with a workplace injury:

- The presence of a belief that all pain is always harmful/ potentially severely disabling
- Fear-avoidance behaviour (avoiding movement or activity due to misplaced anticipation of harm from any increase in pain) and reduced activity levels
- Tendency to low mood and withdrawal from social interaction
- An expectation that passive treatment rather than active participation in therapy would help.

## Identifying yellow flag risks

One of the best ways to identify risks is to ask a range of questions during an examination. Asking questions is often an effective way of deepening rapport and obtaining a first hand impression of how a worker is coping.

The questions should centre on the worker's beliefs and feelings towards their injury, their home situation and any influences from or within the workplace.

Some questions to address coping issues for a worker with pain include (phrased in one's own style):

- Have you had time off work in the past for your injuries?
- What do you understand is the cause of your pain?
- What are you expecting will help you?
- How are your employer/ co-workers/ family responding to your condition?
- What are you doing to cope with your pain?
- When do you think you will return to work?
- Do you enjoy your job?
- Have any injuries in the past taken a long time to improve?
- Are you worried about not getting better?

The key issue/question the clinician must answer is "What can be done to help this person experience less distress and disability?"

An alternative to this may be asking the worker to complete a questionnaire such as:

- Kessler Psychological Distress Scale (K10), Distress and Risk Assessment Method (DRAM) or Orebro Musculoskeletal Pain Screening Questionnaire (OMPO)
- to initiate awareness of issues that need to be explored and potentially addressed or resolved.

Links to these questionnaires can be found on WorkCoverSA's website [www.workcover.com](http://www.workcover.com) > health provider > outcome evaluations

## When is a worker at risk?

A worker may be considered to be 'at risk' if:

- there is a cluster of a few very salient yellow flag factors
- there is a group of several less important yellow flag factors that combine cumulatively.

Risk factors are often easier to address at early stages. Psychological referrals will assist more difficult therapeutic situations, however, therapeutic rapport and fostering self-efficacy is essential to ensure successful treatment outcomes.

## Steps to assist workers at risk

Some suggested steps to help workers who may be 'at risk' are:

- Provide a positive expectation that the worker will return to normal activity. This is true of most injuries other than catastrophic injuries.
- Help to maintain positive cooperation and collaboration between the individual, the employer, the claims and rehabilitation staff and other health professionals.

- Make a concerted effort to communicate that having more time off work reduces the likelihood of a successful return to work. In fact, longer periods off work result in reduced probability of ever returning to work and to normal life activities.
- Keep the worker active and at work if possible, even for a small part of the day. This will help to maintain work habits and work relationships. Consider reasonable requests for selected duties and modifications to the workplace.
- Promote self-management and self-responsibility. Encourage the development of self-efficacy to return to work. Be aware that developing self-efficacy will depend on incentives and feedback from treatment providers and others.
- If recovery is hindered by fear of movement, fear of pain or fear of re-injury, specifically address these issues.

If the barriers to return to work are identified and are too complex to manage, referral for psychosocial assessment and intervention by a psychologist, psychiatrist or specially trained general practitioner with the appropriate interest, experience and skills should be considered

## Where can I get more information on yellow flags?

Further information or details about yellow flags is contained in *A guide to assessing and managing red and yellow flags for workers compensation patients* which can be obtained from WorkCover's website [www.workcover.com](http://www.workcover.com) > health provider > reference library > publications and forms