



Functional Progress Notes

The Benefit of Documenting Your Patients Progressive Return to Work Treatment

Jim Mecham, MSIE, OTR/L, CPE, CFCE

Concept | Design | Creation

The concept, design, and creation of a [Functional Progress Note](#) began in 1998 while I was working as an Occupational Therapist in a work hardening program. As is common with many work hardening programs, this particular program was attached directly to an outpatient orthopedic clinic. During this time, I had the opportunity to work with some outstanding occupational medicine physicians who required every outpatient orthopedic therapist to provide them with lifting, carrying, pushing and pulling [documentation](#) on every progress note sent to them. If this progressive information was not on the progress note as required, the therapist would then hear from the physician's nurse. The nurse would let the therapist know that they did not provide the documentation the doctor wanted and would make sure the therapist provided that during the next progress note.

While having a conversation with a fellow therapist who was treating a workers' compensation patient, who had sustained a significant injury, I had asked where the client was in regards to lift, carry, push and pull. The therapist mentioned numbers that they were putting on the progress note to the physician. I had a job description for the patient because a few months earlier I was treating a work hardening patient from the same employer/same job. I asked the therapist if they wanted the job description and since they were discharging the patient, and that they should make a [recommendation](#) to the doctor that this client required work hardening. I knew exactly what the jobs physical demands were and knew the patient was not even close to being able to do the job. The therapist responded saying they were not interested in the job description and it was not their place to make a [recommendation for work hardening](#). They responded further that only the occupational medicine physician needed the job description and any return to work or work hardening decision should come from the doctor.

I walked away from that conversation baffled. My thoughts were as follows:

1. The therapist has seen this patient for months and has functionally tested them over time in regards to return-to-work function.

2. They should know what the job requires and the focus of the rehab should be about return to work.
3. A physician wants the lifting, carrying, pushing and pulling abilities to make a return-to-work decision but has only a few minutes to make that decision. Why not recommend what would be in the best interest of the patient based off of all the data when the therapist sees them for 60 minute treatment sessions 3 days per week?
4. No one knows better than the treating therapist if the client can work or needs work hardening/conditioning/advanced work rehab as the next step in successful return to work practice.

In 2002 I began working for [OccuPro](#) and was given the opportunity to work with a progressive outpatient private practice in the Midwest. I was tasked with managing and growing their existing industrial rehab program which consisted of on-site services, [Functional Capacity Evaluations, and Work Conditioning](#). I was surrounded by great owners and management of this very progressive outpatient rehabilitation practice.

In some of the early meetings I proposed that all therapists within their 12 locations needed to know how to perform functional documentation and make sure that when they were communicating with the physicians in regards to progress notes that they documented return-to-work function. Functional Progress Notes were born.

Application | Benefits | Results

We quickly realized that Functional Progress Notes did a number of things.

- Physicians appreciated getting [return to work information that](#) said exactly how close to or how far away their patient was to returning to work.
- Case Managers loved them because they could have cared less in regards to a patient's range of motion and muscle strength. They wanted to know how close their client was ready to return to work.
- We began sending the [Functional Progress Notes](#) to the employers and they greatly appreciated knowing the progress their employee was making in regards to returning to the essential functions of their job. This communication also spurred on-site cash-based services.

- More objective decisions were being made in regards to what clients required or did not require skilled work conditioning/hardening programs.
- The insurance carrier had objective information in regards to their client needing or not needing work conditioning and there were not as many denials.
- Less patients were returning to rehab following re-injury.
- Workers compensation referrals to the practice started increasing because the referral sources liked this documentation as compared to getting basic musculoskeletal progress note documentation.
- Injured workers were getting back to work quicker.

The concept caught on like wild fire and we began teaching rehabilitation professionals all across the United States how to perform Functional Progress Notes and Functional Discharge Summaries. The need for an innovative software system to produce these reports in mere seconds was realized and the [Online Assessment Application](#) was born.

Growth | Expectations | Future

Thousands of Functional Progress Notes and [Functional Discharge Summaries](#) are being performed every month all across the United States. OccuPro's statistics show that more Functional Progress Notes are being performed than Functional Capacity Evaluations.

This innovative product line single handedly takes a rehab practice and turns them into a clinic that specializes in the full duty return to work of the injured worker. It separates a standard rehab practice and instantly turns them into a local expert in regards to return to work. It also increases work conditioning referrals by 100% within the first year.

OccuPro's national based benchmarks, which have been gathered over the last 11 years, show that a rehab practice will perform [Functional Progress Notes and Functional Discharge Summaries](#) on 50% to 70% of their existing workers' compensation patients. 80% to 90% of these at the end of rehab will show that the outpatient workers' compensation patient can go back to full duty work. 10% to 20% will objectively show the treating clinician that the client has 5/5 muscle strength, full range of motion, but cannot perform 100% of the jobs essential functions and thus requires work conditioning.

The magic number for successful implementation has always been 10%. Meaning, if 10% of your practice is workers' compensation patients this approach has proven highly successful for these practices 100% of the time. If your workers' compensation volume is 5% to 10% of your practice this approach can help you increase your work comp volume. If less than 5% of your practice consists of workers' compensation patients this approach has worked on many occasions but other things need to be done to help boost your workers compensation patient numbers.

OccuPro has trained thousands of clinicians on how to perform Functional Progress Notes and Functional Discharge Summaries in our [Comprehensive Industrial Rehab Training course](#). We have put our software in all across the United States and clinics have made a return on their investment on average within three months with this approach.

Learn More

If you want to [learn how you can easily take your practice to the level](#) of a specialty clinic in regards to the treatment and full duty return-to-work of the injured worker contact [OccuPro](#) today to participate in their Live in Class, Live Interactive Webcast or On-Demand Comprehensive Industrial Rehab Training continuing education course. Or, [call Jim Mecham](#), Continuing Education Director at OccuPro at 866-470-4440 as he loves to talk about this innovative solution and how it can help you grow your industrial rehab/return-to-work practice.

Kenosha Corporate Office
OccuPro
3921 30th Ave Suite A
Kenosha, WI 53147
866-470-4440
info@occupro.net
www.occupro.net

