



[Workers' Comp](#)

Practical Application of Behavioral Coaching Techniques

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This case study showcases the power of behavioral coaching techniques in transforming an injured employee's recovery. Through empathy, active listening and strategic intervention, Enlyte's Telephonic Case Manager helped break barriers to healing—leading to improved outcomes, renewed engagement, and meaningful cost savings.



The Problem

An employee injured his elbow at work when hit by a recycling can. As a result of the injury, he needed surgery to clean the wound and was hospitalized for IV antibiotics, with a PICC line inserted to deliver the medication.

At a follow-up visit, the doctor found that the surgical wound had completely reopened. The injured employee required another surgery to remove damaged tissue and a wound vacuum was placed to aid healing. He was also prescribed additional oral antibiotics. At the same time, he was dealing with high blood pressure and searching for a new primary care doctor.



The Solution

Telephonic Case Management (TCM) Intervention

The TCM introduced herself to the injured employee and explained her role, but he responded negatively, stating “lies.” In response, the TCM actively listened and acknowledged his frustrations, building trust between them. She was then able to conduct a thorough assessment of his condition, medical history and comorbidities, including paranoid schizophrenia and high blood pressure.

The TCM coordinated the IV antibiotic treatment, helped transition the injured employee to oral antibiotics and provided education on proper wound care and medication adherence. She encouraged him to visit his family physician for blood pressure management and offered consistent support to ensure adherence to the treatment plan. Regular communication with the treating provider allowed the TCM to proactively address issues, including a tendency toward self-treatment for his wound care.



Barriers to Recovery

- › Post-op infection
- › Not healing
- › Negative outlook
- › Catastrophizing
- › History of paranoid schizophrenia
- › Non-compliance with appointments and treatment plan
- › Transportation issues

The injured employee missed several appointments, prompting the TCM to reach out. He explained that his car had broken down, venting his frustrations about having a mentally challenging day. The TCM employed active listening, showed empathy and helped him identify the source of his distress.

The injured employee shared, “I’m tired of living this way,” and lamented that “nothing in his life was good.” The TCM noticed his mother in the background offering support and used this moment to reframe his thinking. She asked if he agreed that his caring mother was a positive aspect of his life. He confirmed. She then highlighted other positives, such as his healing elbow and access to shelter and food. He agreed with these observations as well.

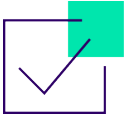
Tools and Techniques Used

L A S E R

By interrupting the cycle of negative thoughts with truthful, positive facts, the TCM helped the injured employee recognize his situation was improving. He acknowledged he had been overgeneralizing and could see progress in his recovery. The TCM also praised his wound care efforts, emphasizing signs of healing noted by his doctor.

Empowered by this conversation, the injured employee rescheduled his missed appointments and became more engaged in his care plan.

Throughout the injured employee’s recovery, the TCM applied behavioral coaching skills such as active listening, cognitive-behavioral coaching and patient education to identify and remove barriers to recovery. Her proactive communication with both the injured employee and his provider ensured that medical complications were promptly addressed, preventing delays and fostering progress in his healing journey.



The Results

The shift in mindset enabled the injured employee to successfully return to his pre-injury job. While the projected claim cost was \$114,000, the actual claim cost came to \$81,652, resulting in a total savings of \$32,348, which was 6 times the ODG estimated savings amount.

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