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## INTERNATIONAL ACADEMY OF CHIROPRACTIC OCCUPATIONAL HEALTH CONSULTANTS

*"International in scope and membership...a nonprofit organization fostering public health and safety through education, ergonomics, optimal clinical management and other measures."*

### **Occupational Chiropractic & Applied Ergonomics Newsletter**

## From the IACOHC President – A Special Message for You from Dr. Joseph J. Sweere...

For the 74<sup>th</sup> consecutive year, General Motors Corporation remains the world's largest car and truck manufacturing company. In spite of this impressive track record, GM's stock price is down 45% since a year ago. The reason becomes clear when observing that it posted losses of \$1.1 billion in the first quarter of business 2005. GMC management cites the main source of losses as the health care expenditures provided for their 1.1 million workers, retirees and dependents worldwide, totaling \$5.6 billion this year (\$1,525 for every vehicle manufactured). There are currently 2.6 retirees and dependents for every GM worker, representing 69% of GM's health costs.

In 1962, half the cars sold in America were made by GM. Now its market share is about 25%. As recently as 1999 the big three automakers, GM, Ford and Chrysler had 71% market share. Their share now is 58% and falling. In 2004 Ford forecasted profits of \$1.4 billion to \$1.7 billion for 2005, and instead will have losses between \$100 and \$200 million for 2005. Annual double digit inflation in health care expenditures is identified as a primary source of the economic stress that continues to plague American businesses regardless of size, reputation or stability.

The rather bleak scenario above represents only the tip of the economic iceberg when considering that 85% of American workers are employed by firms with fewer than 100 workers. If huge corporate entities such as those mentioned above are faced with no-end-in-sight inflationary health care cost concerns, it becomes obvious that the business climate of the entire country is at stake within the competitive world marketplace.

### **A Fit for Chiropractic**

Visionary doctors of chiropractic have long recognized the significant role of the employer for health care in this country. In times past, care providers could effectively target individual consumers with their various marketing and patient education strategies. Since the advent of managed care however, the consumer is no longer principally the average American breadwinner purchasing insurance coverage for his or her family.

The number of Doctors of Chiropractic nationwide who share the common interest of this profession serving as a significant remedy for what ails American businesses (both large and small) continues to grow! Through a growing menu of services of clinically effective after care, and cost-effective injury/illness preventive strategies, chiropractors have the potential for dramatically easing the health care cost burden for employers willing to invest in the expertise of appropriately trained doctors of chiropractic.

The highest level of success in the field of occupational health and applied ergonomics is enjoyed by doctors who focus on relationship building with the employers in their communities. Almost invariably, doctors are *invited* to become active members of the corporate health, safety and wellness team(s) by demonstrating consistency in five areas of their professional lives, namely likeability, credibility, availability, accessibility and affordability.

How each of these criteria is conveyed to prospective business clients depends almost exclusively upon successful and effective communications. Having observed hundreds of successful outcomes in this specialty, the bottom line success in the field of occupational health is all

(from pg. 1)

about communication skills and one-on-one relationship building. How you are perceived in your community is hugely important. Keep in mind, you cannot *not* communicate. What you do and say and *how* you say it is key to effective communication. Also remember however, what you *do not say*, and *do not do* also speaks volumes regarding how you will be perceived in your community. By joining and becoming active in your local chamber of commerce as well as the local branch of your state safety council and participating in local health fairs sponsored by local businesses will convey a powerful message to the leaders and decision makers within your local business community. Finally, it is important to remember that the bottom line consequences of illnesses and injuries among workers and their affected families must always be measured more in human suffering than dollars spent or saved by their employers.

**Your Support is Appreciated**

I wish to convey sincere gratitude to each of you and extend best wishes throughout the coming year and beyond. Your continued support and membership in the IACOHC is greatly appreciated. Please make a resolution to share your enthusiasm for occupational health with one or more of your most respected colleagues. Together we can accomplish the positive vision for chiropractic and corporate America that we all share. Thank you.

Sincerely,  
Joseph J. Sweere, DC, DABCO, DACBOH, FICC  
President

*(Source: Will, G. Opinions. Health care pushes GM into welfare state. Owatonna People's Press. 5/1/05.)*

**FEDERAL AVIATION  
ADMINISTRATION AMENDS  
REGULATIONS FOR DRUG,  
ALCOHOL TESTING**

The Federal Aviation Administration (FAA) has published a final rule that amends the FAA regulations governing drug and alcohol testing to clarify that each person who performs a safety-sensitive job function for a regulated employer by contract, or by subcontract at any tier is subject to testing. The rule becomes effective on April 10, 2006. Quoting the Federal Register... *(below)*

**14 CFR Part 121  
Antidrug and Alcohol Misuse Prevention  
Programs for Personnel Engaged in  
Specified Aviation Activities; Final Rule**

[Docket No.: FAA-2002-11301; Amendment No. 121-315]

RIN 2120-AH14



**SUMMARY:** This final rule amends the FAA regulations governing drug and alcohol testing to clarify that each person who performs a safety-sensitive function for a regulated employer by contract, including by subcontract at any tier, is subject to testing. These amendments are necessary because in the 1990s, the FAA issued conflicting guidance about which contractors were subject to drug and alcohol testing. This action also rescinds all prior guidance on the subject of testing contractors.

**DATES:** These amendments become effective April 10, 2006. Affected parties, however, do not have to comply with the information collection requirements in part 121, Appendix I, Section IX, and Appendix J, Section VII, until the FAA publishes in the **Federal**

**Register** the control numbers assigned by the Office of Management and Budget (OMB) for these information collection requirements. We will publish the control number to notify the public that OMB has approved these information collection requirements under the Paperwork Reduction Act of 1995.

**DIPLOMATE – CHIROPRACTIC  
OCCUPATIONAL HEALTH & APPLIED  
ERGONOMICS  
SCHEDULE, SPEAKERS, TOPICS**

10/15/05 10/16/05	<b>Joseph J. Sweere, DC, DACBOH</b> The role of chiropractic in occupational health.
11/12/05 11/13/05	<b>Scott Bautch, DC, DACBOH</b> How to promote services with an emphasis on industrial relations.
12/17/05 12/18/05	<b>Elizabeth L. Auppl, CASP/T, CDSP/T;</b> <b>Joseph J. Sweere, DC, DACBOH;</b> DOT Physical examinations; DOT Drug Testing/Alcohol Screening Certification; Marketing in Your Own Backyard.
1/21/06 1/22/06	<b>Chad Henrikson, DC, DACBOH</b> Providing chiropractic services within the corporate setting.
2/18/06 2/19/06	<b>Scott Donkin, DC, DACBOH</b> Ergonomic considerations of the seated worker.
3/18/06 3/19/06	<b>Brian Halliday, MS, FIIRM</b> Accident and injury prevention: how to perform worksite hazards analysis.
4/29/06 4/30/06	<b>Tom Albin, PE, CPE</b> Introduction to applied ergonomics.
5/20/06 5/21/06	<b>David Thorpe, DC, DACBOH</b> Marketing occupational health and ergonomic services.
6/17/06 6/18/06	<b>Joseph Sweere, DC, DACBOH</b> Biomechanical stress index, pre-placement and post-offer screening examinations.
7/22/06 7/23/06	<b>Robert Scott, MEd, DC</b> Field applications of applied ergonomics.

**Call (952) 888-4777, ext. 249 to register.**

## THE IACOHC *IS* HELPING – MAKING STRIDES, SEEING CHANGES

by Elizabeth L. Auppl, Director

Most often, it is not easy to see what takes place 'behind the scenes' of running an organization. You may wonder what exactly the IACOHC is doing for its members, the specialty and profession. That's a great question that I like to hear because, as mentioned, so much is done and a strong core of people are working hard on your behalf, doing whatever it takes to advance chiropractic in occ-health.

The IACOHC (as you know) is a (nonprofit) chiropractic organization that exists with the sole purpose of advancing DCs in the specialty field of occupational health and applied ergonomics via education, news and resources and other measures. In recent years – and even now as I write this, we have worked hard to develop solid, marketable, *effectively useful* educational programs for you to participate in. Our hopes are that by attending one of the IACOHC's program, DCs will be empowered to advance their efforts with industrial clients come Monday morning...like helping you to help yourself.

The IACOHC has effectively participated in revamping the Diplomate program by suggesting flow of topics and/or speakers that can address current trends and needs in occupational health. (See *schedule, pg. 2*). As an example, one of the significant additions to the Diplomate program is a 12 hour session on Dept. of Transportation (DOT) training and certification for performing DOT drug testing and alcohol screening, with an overview session of the DOT physical exam and also including a portion of the program focused on how to effectively market your clinic and practice in your community, and how to meet with the right people who have either purchasing influence or buying power.

The IACOHC is *the* organization that understands:

1. *The importance of teaching DCs about marketing;*
2. *The value to the DC for marketing not only occ-health services but their clinical practice in general;*
3. *How to get to the decision makers and how to conduct the meeting with an employer representative or the business owner; and,*
4. *Effective ways to meet the needs employers have for health care and for workers' compensation injuries and injury prevention including training for workers.*

We are always fine-tuning our programs and resources to be the best available, and so that participants in the programs will be equipped for pursuing or responding to businesses, skilled to

perform a menu of services, and motivated to action by knowledge and actual data.

The IACOHC works with the American Chiropractic Association's Council on Occupational Health, a like-minded organization, to help bring educational programs around the country. The IACOHC and the Council operate in a mutually supportive, cooperative relationship meaning members can rely on a ***strong united front*** for advancing this profession in occupational health and corporate wellness.

Another major effort the IACOHC is focused on is that of establishing solid, well defined, professional relationships with certain chiropractic vendors that have ability to enhance not only the IACOHC's image and visibility, but importantly can provide services/supplies to you in the most cost-effective manner. Through experience we have developed a process to recognize with whom the IACOHC would like to associate itself with, and has developed an effective process to expertly move dialogue and details along smoothly for a win-win relationship that you can benefit from. Keep your eyes and ears open about this.

A final mention about what the IACOHC has been up to (*but not limited to*) doing, is keeping you aware of changes pertaining to DOT matters surrounding drug, alcohol or physical screenings. You likely know that eventually the Federal Motor Carrier Safety Administration (FMCSA) will establish a certification training requirement for health care professionals to continue performing DOT physical exams; the reward will be a listing in the proposed National Registry of Certified Medical Examiners (NRCME). This makes sense, as it is not too difficult for a driver who was denied the medical qualification to operate a commercial motor vehicle (CMV) to head down the street to another health care provider and get qualified. The FMCSA is looking to improve the quality of the DOT physical examinations being performed across the nation so that highway and roadway safety is improved.

As it goes, there are always challenges and obstacles in operating – but that has never stopped the IACOHC. An area where you can truly help, is to write and submit an article about what you are doing, something you've learned and so forth in the area of occupational health. When the same people are writing all the articles for each issue, it gives a perception that an organization belongs to just a handful, when in fact, the organization belongs to its membership. Please help out this way – you can rest assured it will be greatly appreciated. To learn more, reach me at [eauppl@charterinternet.com](mailto:eauppl@charterinternet.com).

Over the years, I have observed certain trends in both the chiropractic profession and in the corporate world. What a tremendous turn of events right now pertaining to workplace benefits packages and health care – this is an excellent time for chiropractic leadership entities to embark on a national educational and marketing scheme to once

and for all, snuff out antiquated myths about chiropractic and tell the nation about the things chiropractic boasts of: high customer satisfaction, cost effective treatment, accurate diagnosis, treatment options that are noninvasive and drug free, and a host of other attributes that employers will find beneficial to their bottom line!

### **The Employer Holds the Key to Health Care for Millions – but...**

It's true that employers write the check for health care – but as I am writing this article and you're reading it – more and more employers are asking employees to contribute their own dollars via flexible spending accounts and other types of savings programs; employee dollars saved and used specifically for health care needs of the individual or family. This approach (a shift of model) places more responsibility on the individual for their own health and health needs (*gee, is there a market here for workplace wellness or what?*). It also empowers the individual to request of their employer freedom of access to the providers they want and the type of health care they want, **and in the end, individuals will most likely get the right kind of health care in the first place** - the kind of care needed as opposed to one kind of care traditionally offered. ***Isn't this better for the employer's dollar and bottom line, the employee and the entire company? Of course it is.***

Most people prefer avoiding surgeries whenever possible and most want to work with clear minds – not work under the influence of motor or judgment impairing drugs! ***Does the employer stand to benefit from this? You bet!*** What are you doing in your community to position yourself for visibility to employers? What messages are you sending to your current patient base about your clinic's capabilities, strengths and challenges? Here's a tip for you – your current patients are talking about you! They are your best marketing vehicle – or your worse advocates through word-of-mouth advertising. ***Did you know that 75% of Americans choose a health care provider based on the advice or referral of a family member, friend or co-worker?*** That's significant to you!

In very recent years, I would warn DCs that it would take two years of consistent, ongoing, intensive marketing to get the attention of just one employer. ***Wow – has that trend ever changed!*** Now it's commonplace for a DC to call me to say that an insurance company or employer has contacted them 'out of the blue' to "come in next week to address their employees about safety" – get yourself equipped and prepared for this. ***This new trend is exactly what the IACOHC has been waiting for. You cannot afford to wait until the call comes – the employer isn't going to wait for you to get prepared. Keep in mind that business owners are service-driven people and expect the same from those they seek services from.***

### **Importantly, a Closing Commentary**

This is an organization that runs on membership support. If it weren't for you – the IACOHC simply would not exist! I can assure you that. However, if I may be so bold to mention - there is a risk when only a few people are doing the work it takes for operation; inaccurate perceptions may arise to think that the organization is only one or few persons' organization. There are two areas where you can very effectively help out. As mentioned, write articles or submit materials for the newsletters. If you've influence with your state association, your help is coveted to help promote educational opportunities. Contact me.

**Thank you** for your membership over the years – we've so many long-time members and some that seem like lifetime members. IACOHC membership continues to grow – and I anticipate a real growth in the next years as more people are empowered to make decisions about their providers because it is their dollars doing the talking.

**DR. KAREN WILKINSON-BOWERS, Mebane, NC**, has practiced for 11 years in a community where electrical parts manufacturers, fire extinguisher makers, manufacturers of automobile parts, flooring, furniture, and long-term care and other types of industries are represented.

"I feel there is a tremendous need for wellness and prevention in all workplaces; people spend their days there; by learning wellness and prevention at work will of course carry over into all aspects of their lives," Dr. Wilkinson-Bowers states, adding that, "the Diplomate program benefits me greatly – there is a lot of excellent information that will help me pull together a well-rounded, highly marketable occupational health and safety program in my community – the Diplomate program has already shown me how to 'get started' with industrial clients; I look forward to completing the educational program."

**DR. LANCE WEIDNER, Menomonie, WI**, is pursuing the Diplomate program. Having been in practice for 19 years, Dr. Weidner decided to embark on the program, saying, "it gives me an opportunity to do more prevention activities for my patients and business contacts; I have the opportunity to expand my knowledge, thus expand my market by providing additional services to what I've been doing before."

When asked what services he is adding, Dr. Weidner said he plans to add (minimally) D.O.T. services, work site ergonomic and risk management services and others.

Having completed several sessions of the Diplomate program already, he adds, "it's wonderful to have such great people providing so much useful information – what a great resource."