

APRIL 26-28, 2026

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Accreditation statement: The American Association of Occupational Health Nurses, Inc. (AAOHN) is accredited as a provider of nursing continuing professional development by the American Nurses Credentialing Center's Commission on Accreditation.

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Integrating Occupational Health, Primary Care, and Total Worker Health[®] : A Strategic Approach to Workforce Well-Being

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Learning Objectives

Understand the principles of integrating occupational and primary care, including the Total Worker Health[®] framework.

Identify common workplace risk factors and health trends using claims, biometric, and ergonomic data.

Design and implement proactive health strategies (e.g., early intervention programs, industrial athlete training, chronic disease support) that reduce workplace injuries and improve productivity.

Evaluate the impact of health initiatives using safety, engagement, and cost metrics.

Collaborate with employers and interdisciplinary teams to align care delivery with organizational goals.

The Problem Landscape

Challenges and barriers to health & wellness for
workers

The State of Worker Health



32% of work-related injuries that result in lost time are treated in the emergency department Bureau of Labor Statistics, 2021



MSK disorders remain the top injury category. BMUS, Lopes & Lages



Chronic Conditions are rising across all groups



Increased absenteeism & reduced productivity

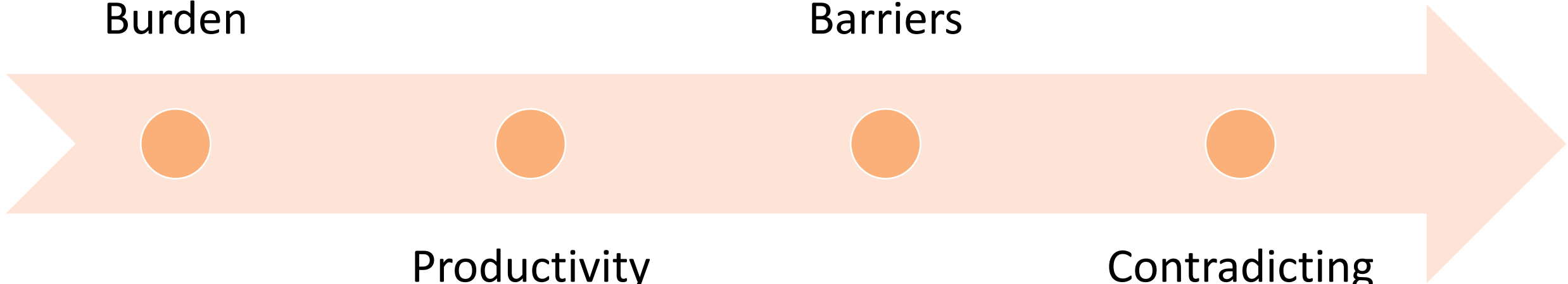
Barriers to Health & Wellness for Employees

Rising Chronic
Condition
Burden

Healthcare
Access
Barriers

Productivity
Impact

Contradicting
Disability
Outcomes



Why Traditional Models Fall Short

Siloed clinical,
safety, and
wellness programs

Delayed symptom
reporting

Inconsistent
restrictions and
RTW guidance

Limited focus on
upstream
contributors

Opportunity for Occupational Health Nurses



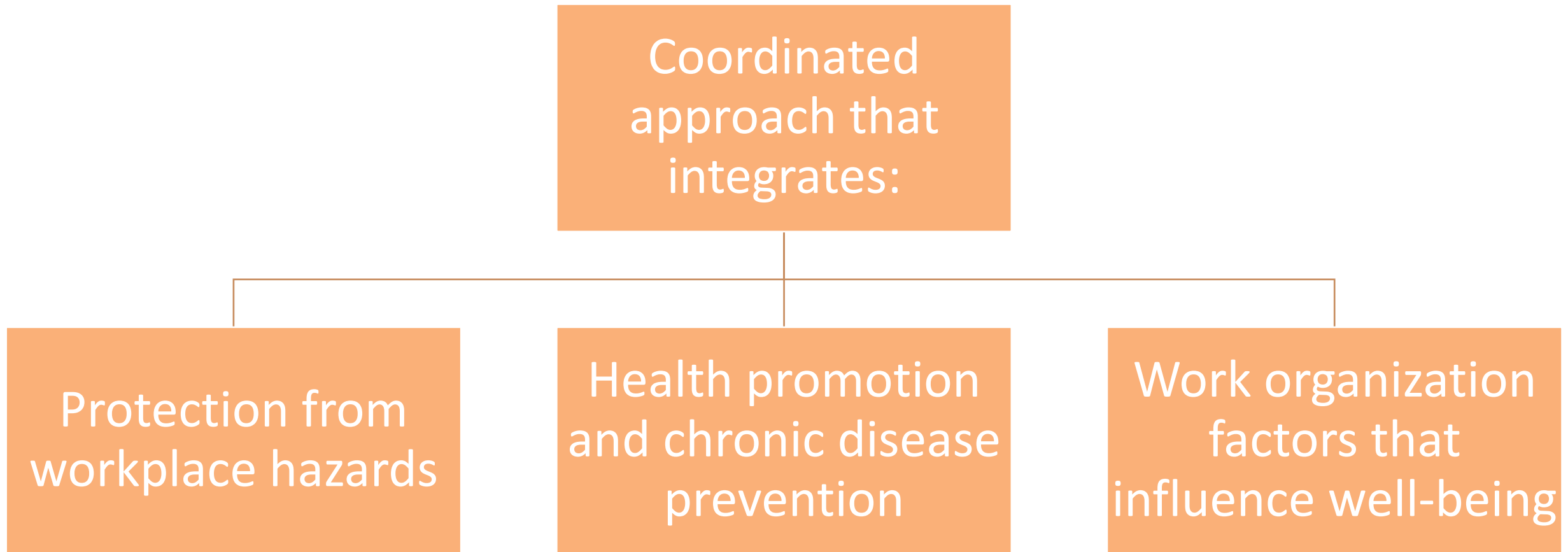
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Total Worker Health® Framework

Total Worker Health[®]



Core Principles



Combine safety + health promotion



Embed work factors into assessment



Align care plans with job demands

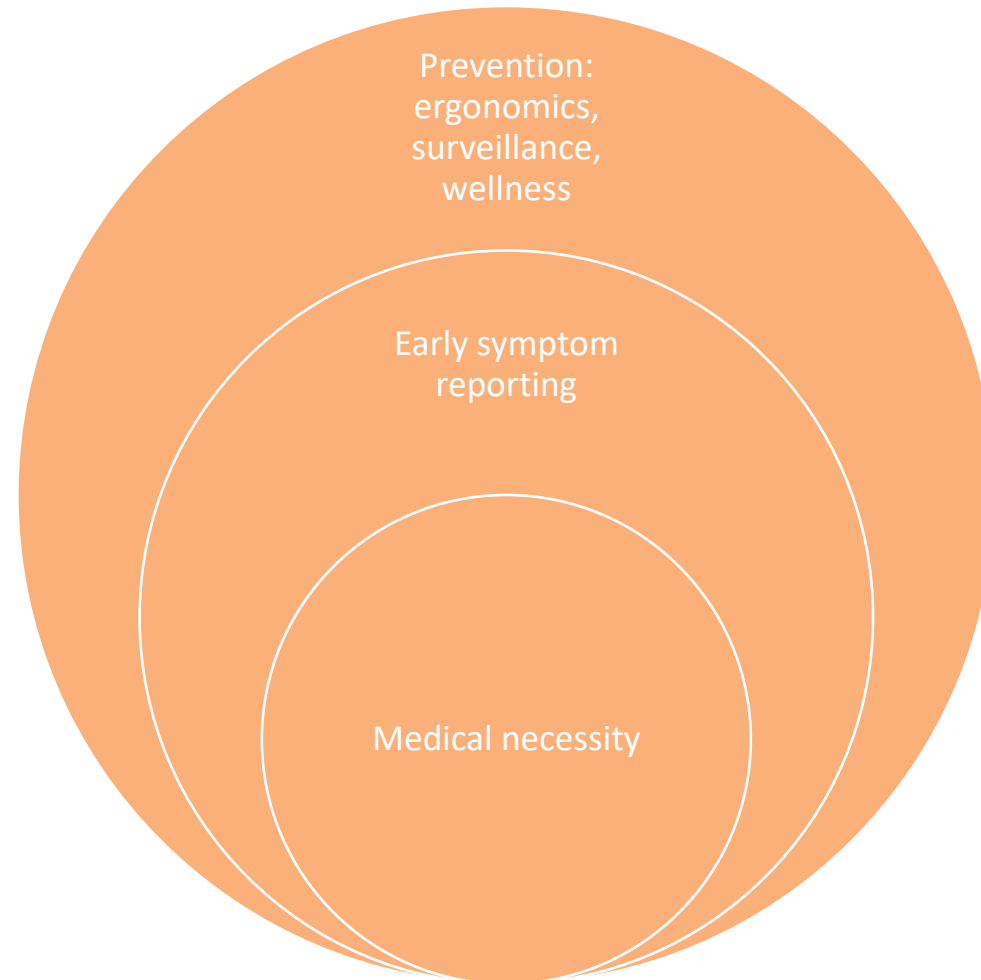


Address upstream contributors to injury and illness

Why TWH Works



Three-Tiered Care Model



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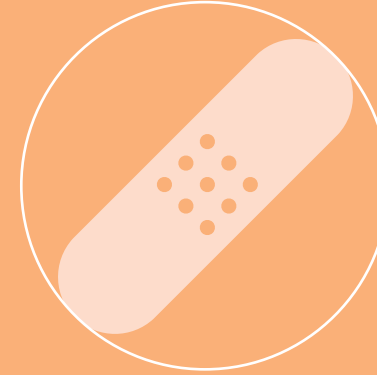
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Integrating Occupational Health & Primary Care

Work as a Determinant of Health



Job demands, exposures, schedules, and stressors directly influence health



Clinical care improves when work factors are routinely assessed



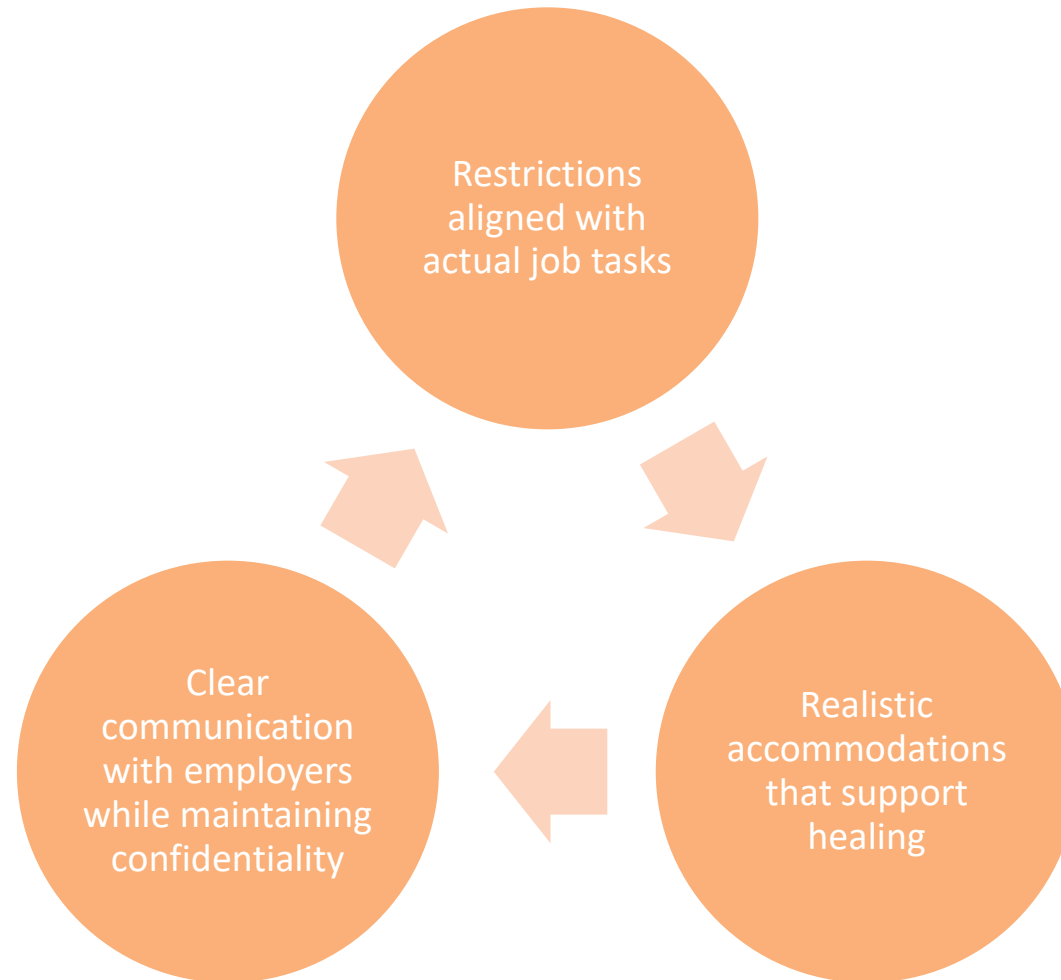
Embedding Work Into Clinical Encounters

Incorporate occupational history into every visit

Evaluate functional demands and recovery needs

Identify psychosocial and environmental contributors

Coordinated Care Plans



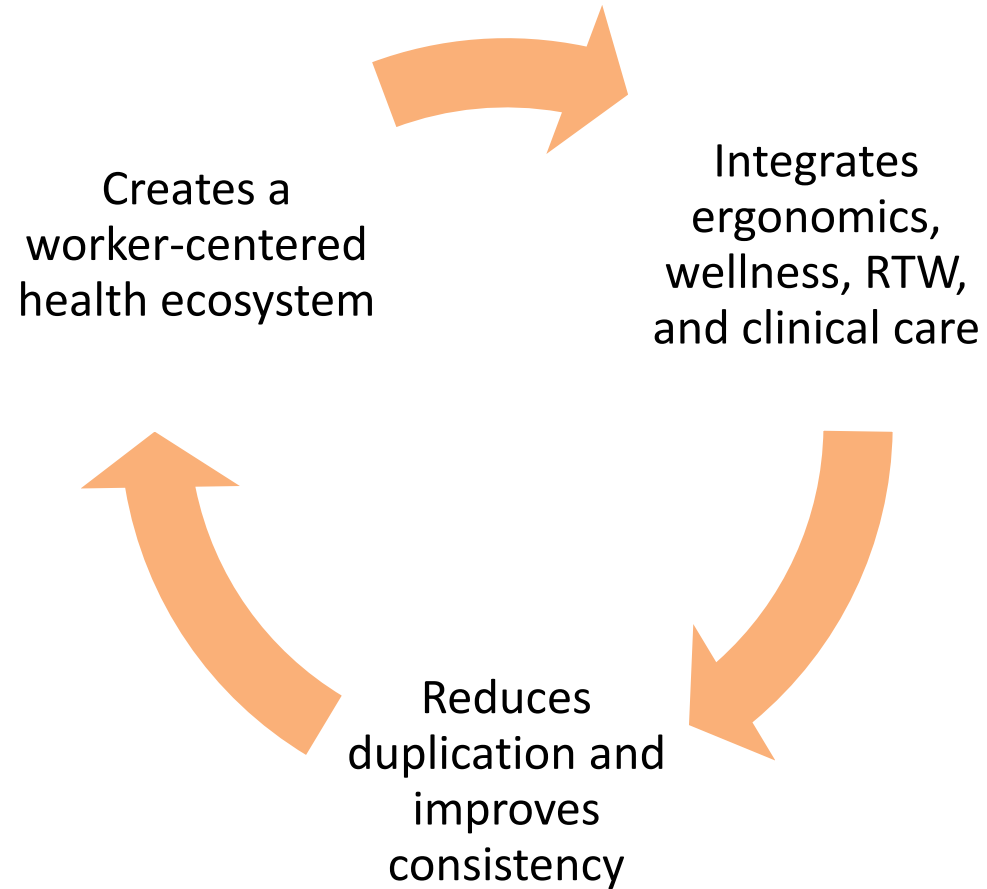
Policy & Upstream Influence

Advocate for
engineering and
administrative controls

Address scheduling,
staffing, and workload
contributors

Promote policies that
support safety and
well-being

Unified Care Model



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Data-Driven Risk Identification

Why Data Matters

Unmet health
needs drive
absenteeism

Excessive OT and
poor recovery
increase chronic
pain

Data-driven
programs reduce
disability
conversion

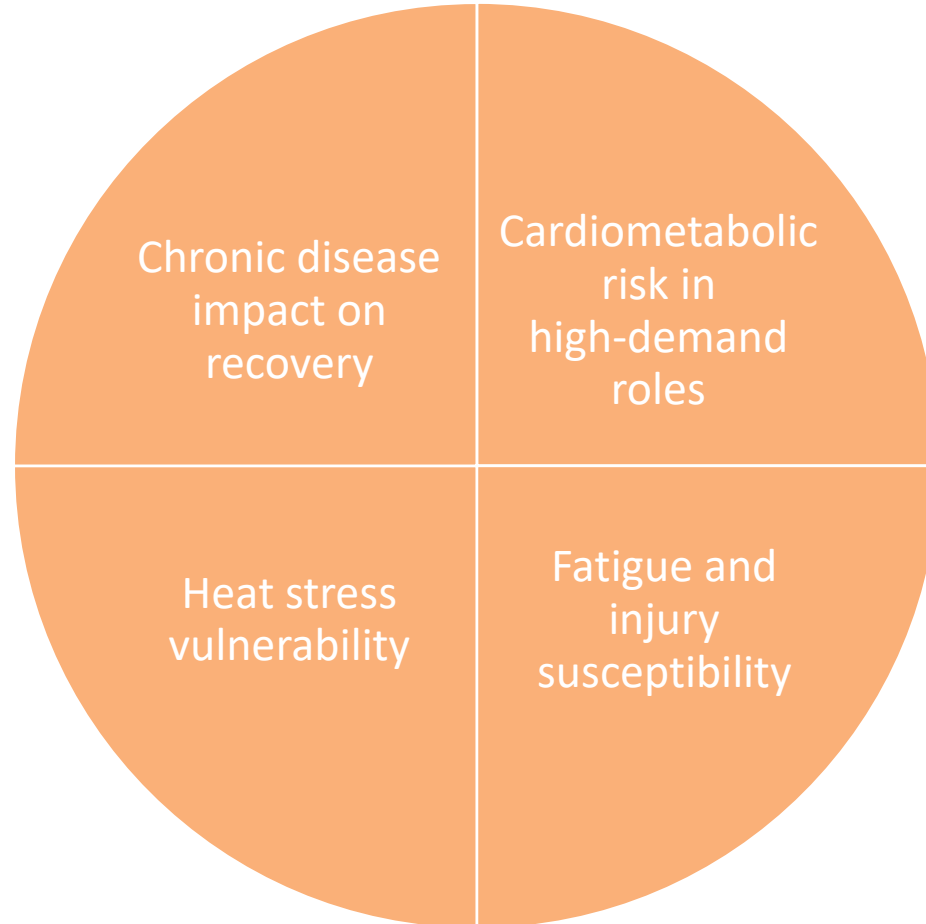
Claims Data Insights

High-frequency
and high-severity
injuries

Delays in
reporting or
treatment

Recurrence
patterns and
job-specific risks

Biometric Data Insights



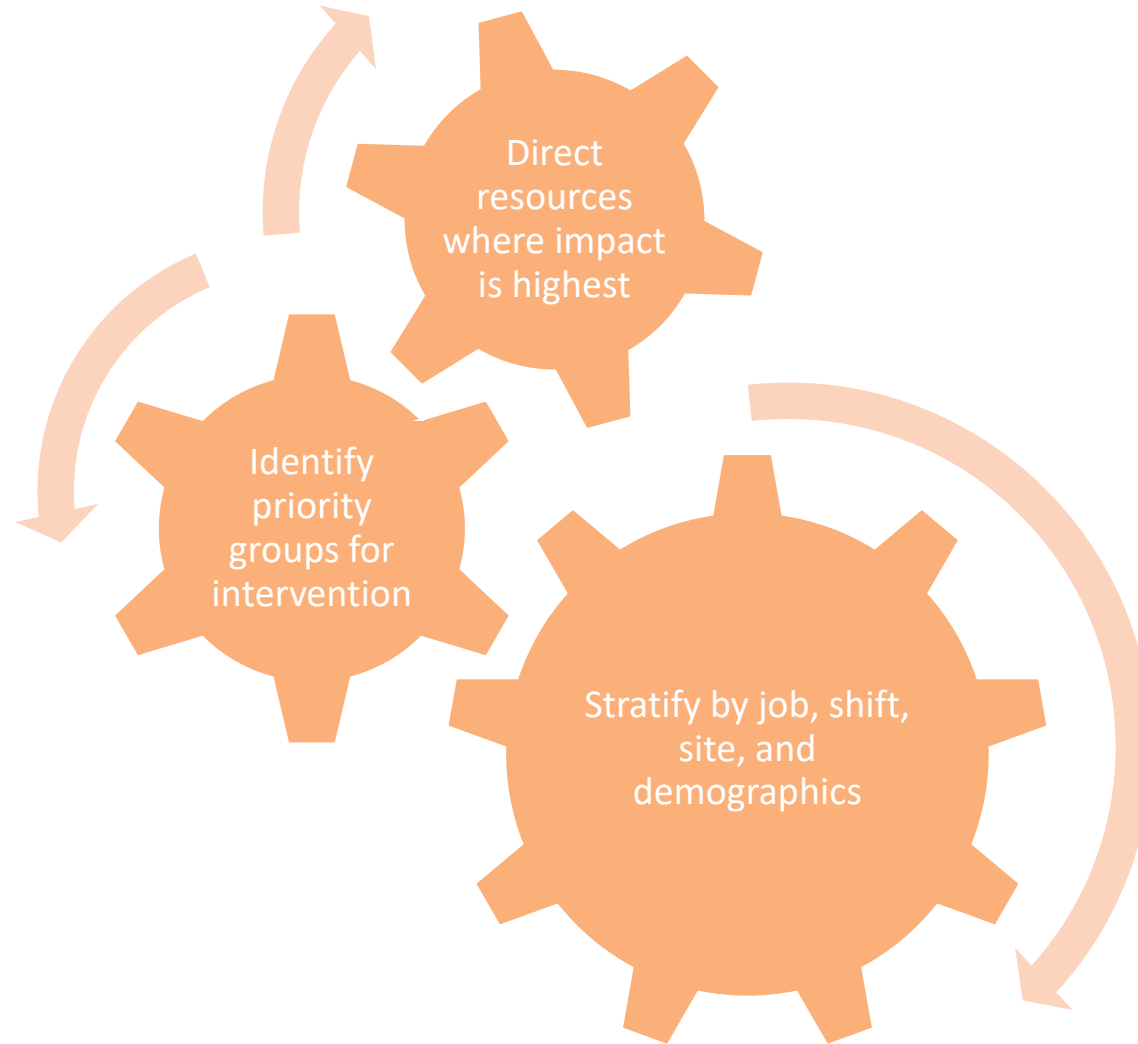
Triangulating Data

Claims +
Biometric +
Ergonomics +
Worker
Feedback

Confirms
patterns and
identifies root
causes

Guides
targeted
interventions

Risk Heat Mapping



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Proactive Health Strategies

Early Intervention Programs

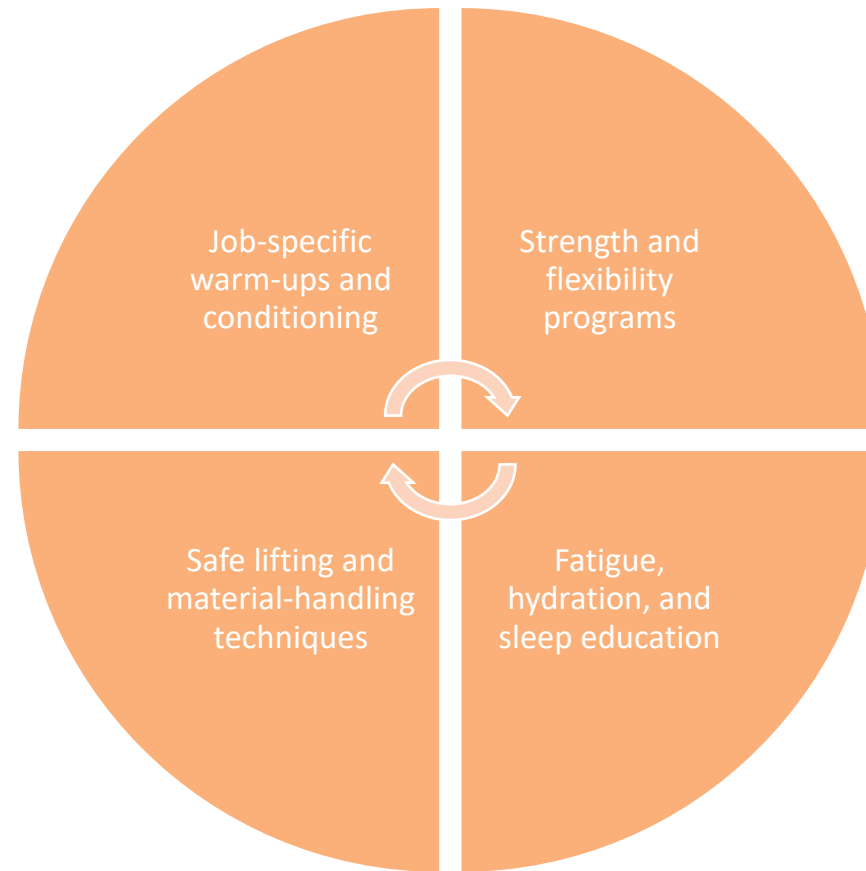
Rapid access to onsite/near-site evaluation

Nurse-led triage and self-care education

Fast-track PT/OT referrals

Modified duty pathways that protect healing

Industrial Athlete Training



Chronic Disease Support

A1c, BP, lipid, and
BMI monitoring

Coaching for
cardiometabolic risk

Stress and sleep
interventions

Integration with
workplace wellness
programs

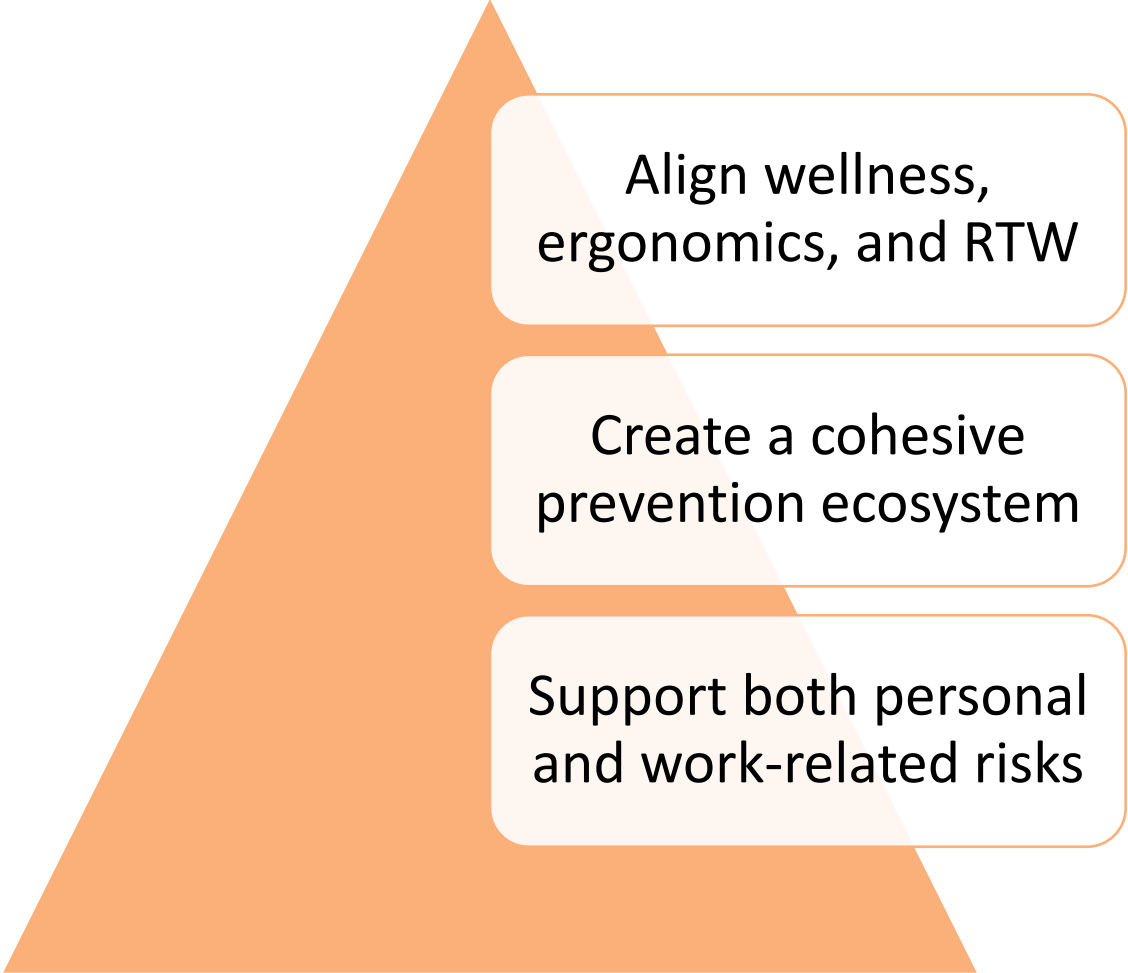
Fatigue & Workload Management

OT
monitoring
and
workload
distribution

Recovery
time and
shift design

Identifying
high-risk
roles and
schedules

Integrated Prevention Strategy



Align wellness,
ergonomics, and RTW

Create a cohesive
prevention ecosystem

Support both personal
and work-related risks

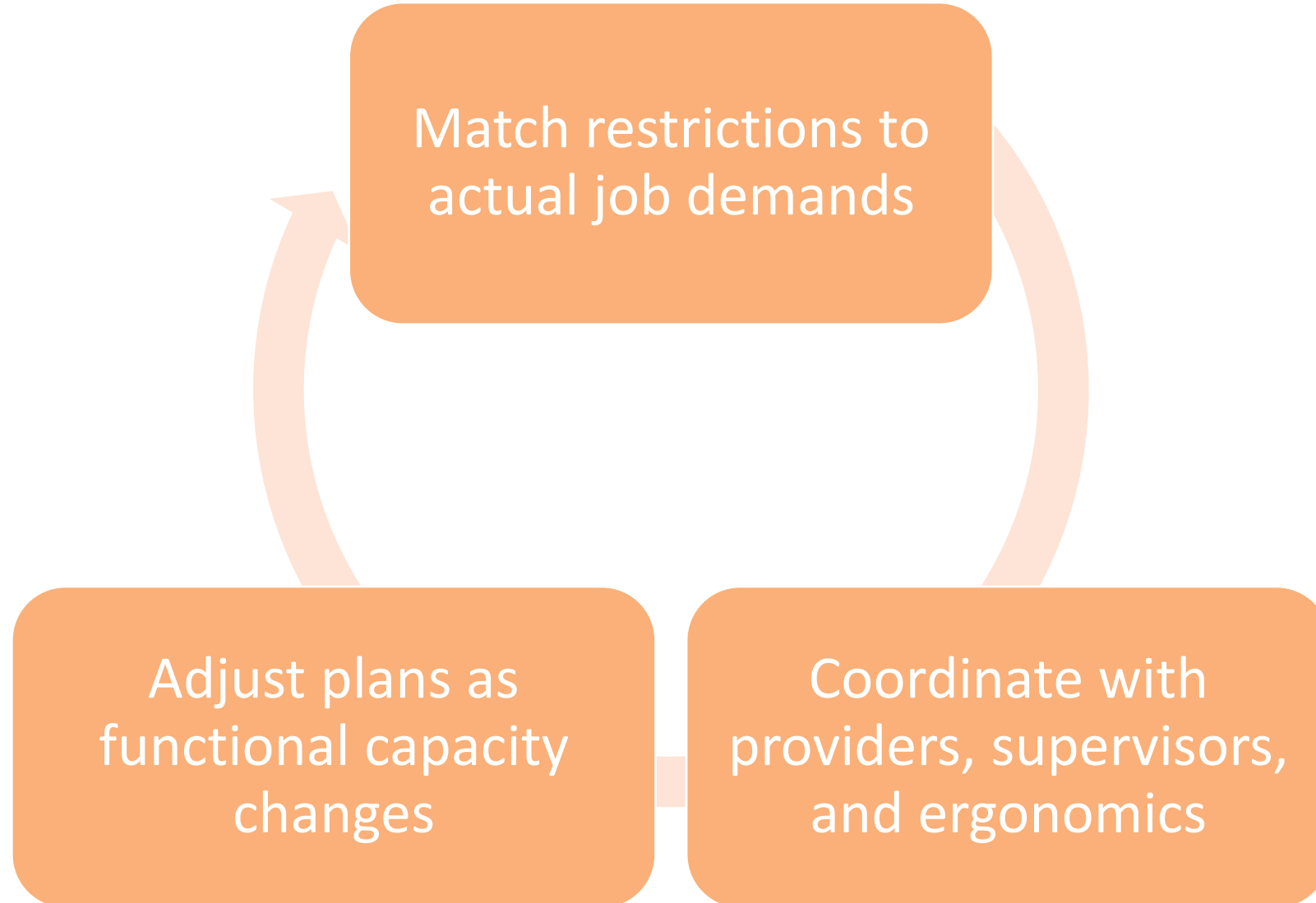
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Return-to-Work as a Continuum

Embedding RTW Into Care



Transitional Duty Pathways

Clear process for
modified duty
placement

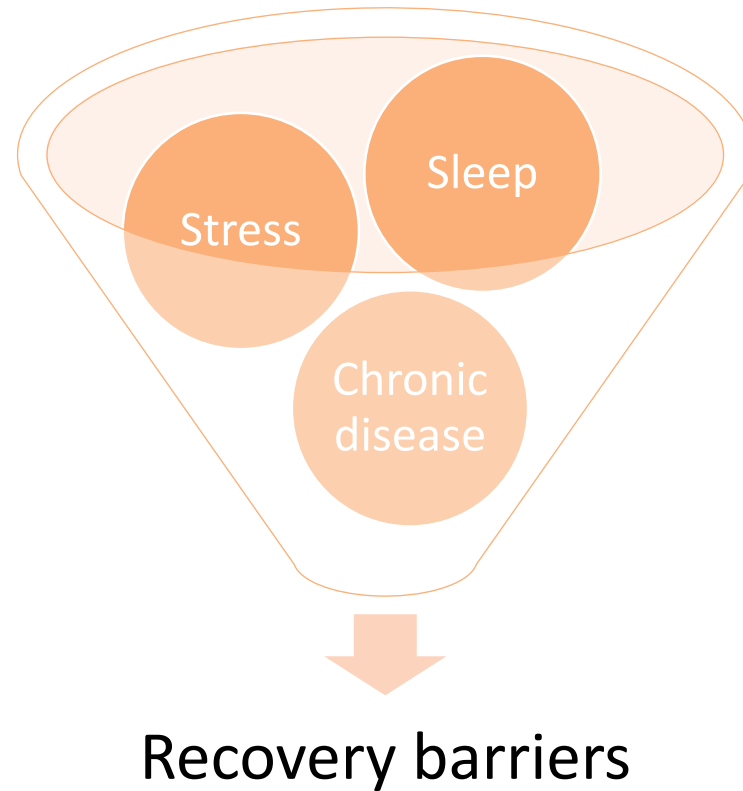
Reduces lost-time
days and
recurrence



Protects healing
while maintaining
engagement



Non-Work Factors That Influence Recovery



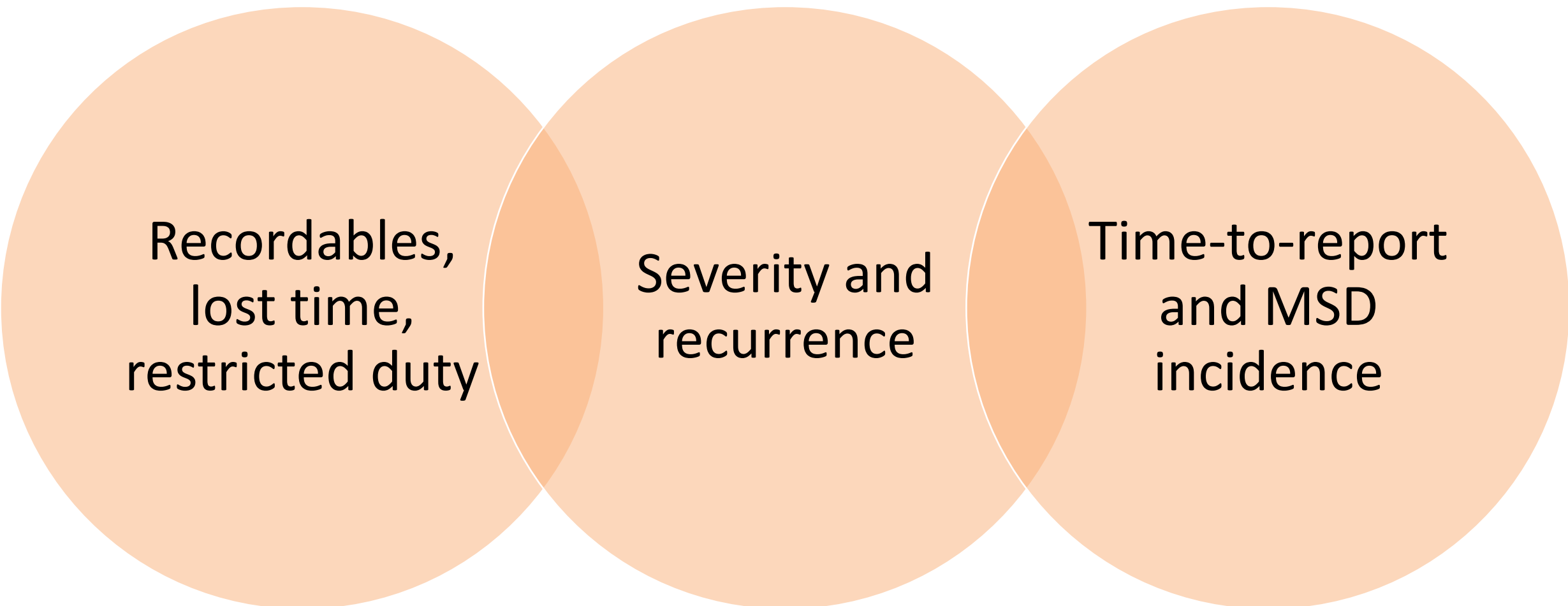
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Measuring Impact

Safety Metrics



Recordables,
lost time,
restricted duty

Severity and
recurrence

Time-to-report
and MSD
incidence

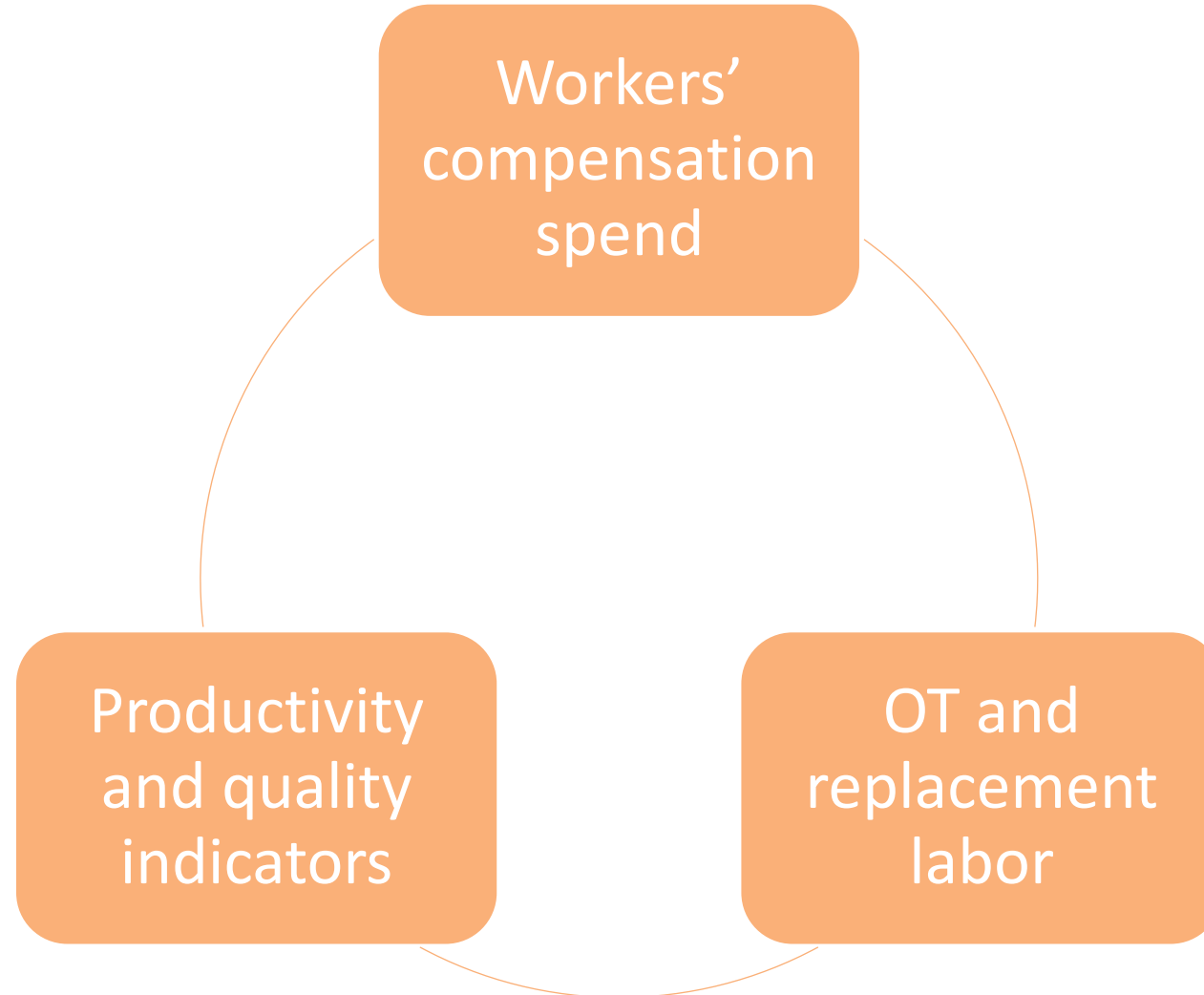
Engagement & Well-Being Metrics

Participation
in early
intervention
and wellness
programs

Safety
climate and
burnout
indicators

Retention in
high-risk
roles

Cost Metrics



Integrated Dashboard



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Collaboration & Implementation

Key Partnerships

Leadership

- Align with strategic goals

Safety & Ergonomics

- Hazard controls and job design

HR

- RTW, benefits, and staffing

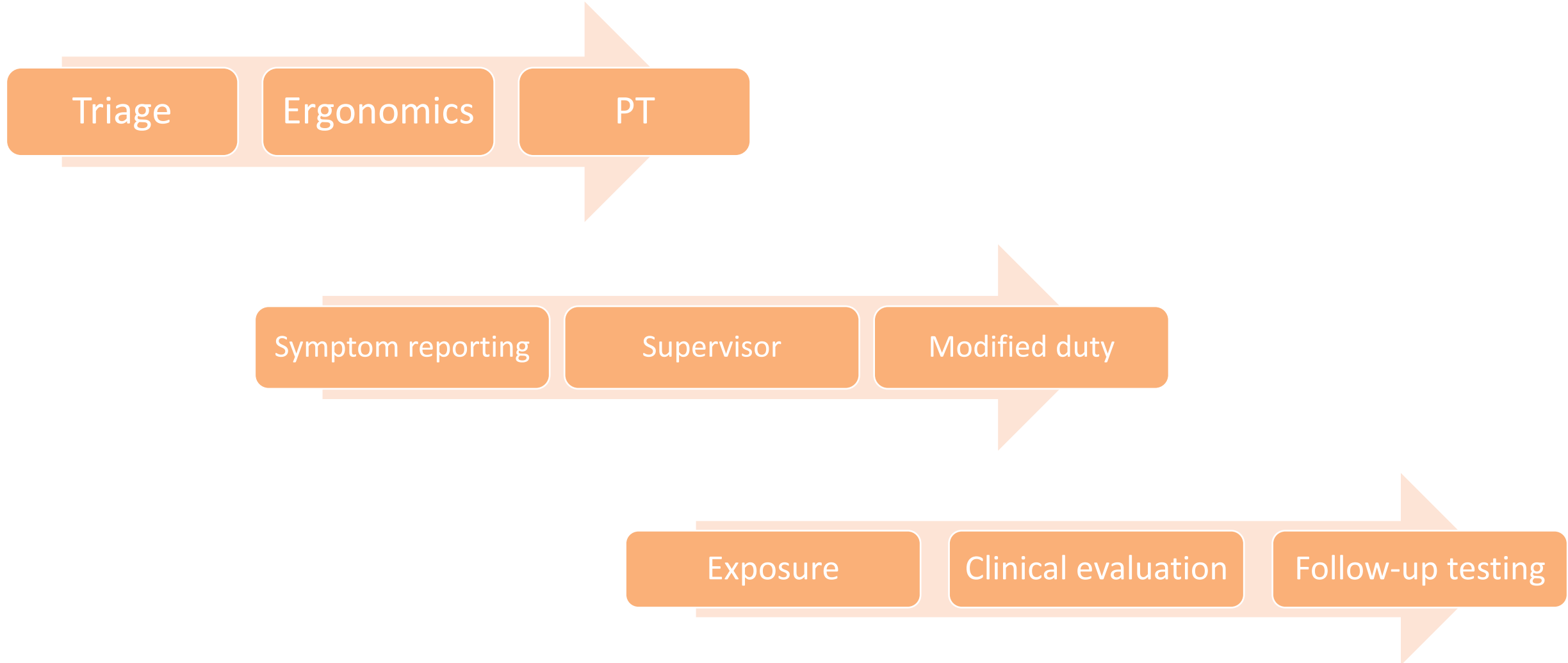
Primary Care & Specialists

- Coordinated treatment

Workers & Union

- Co-design solutions

Joint Workflows



Building Organizational Alignment

Frame
initiatives in
terms of risk
reduction

Demonstrate
business value

Integrate health
into operational
planning

Case Example

Manufacturing facility
High rates of work injuries
Lack of primary care access



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On-site health center
Job analysis
Physical therapy



47% lower DART rate
40% fewer OSHA recordables.
40% lower average injury claim cost.
\$1.5M+ saved through integrating care

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Strategic Recommendations

Strategic Recommendations

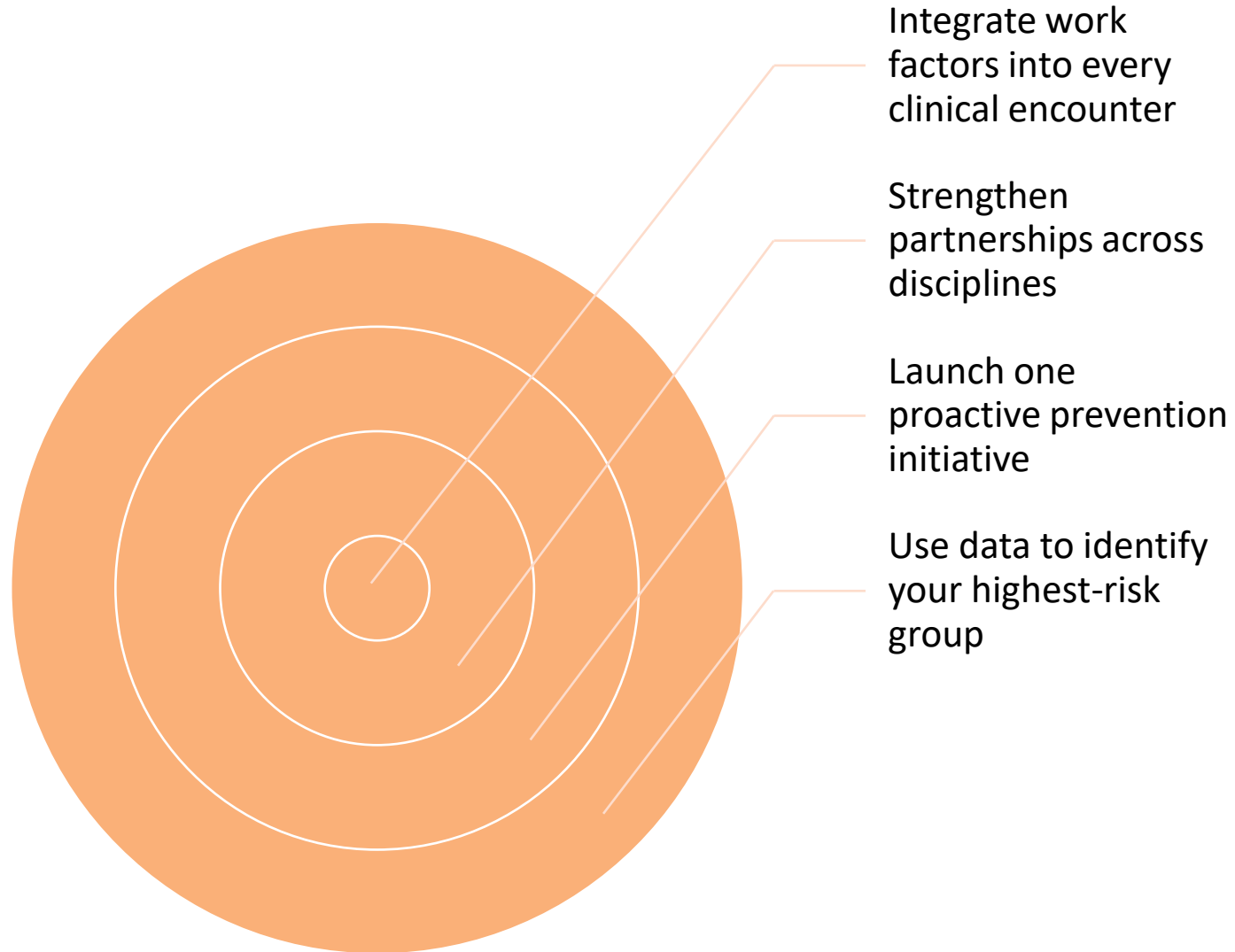
Address unmet healthcare needs

Manage overtime and workload

Implement condition-specific interventions

Use data to drive wellness and prevention

Occ Nursing Call to Action



Thank you!



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