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## Compensation & Benefits Committee - AWCBC Jurisdictional Update Report

<b>Committee Member:</b> Sherry Rose-Christopher	<b>From:</b> WorkplaceNL	<b>Date:</b> April 17, 2019
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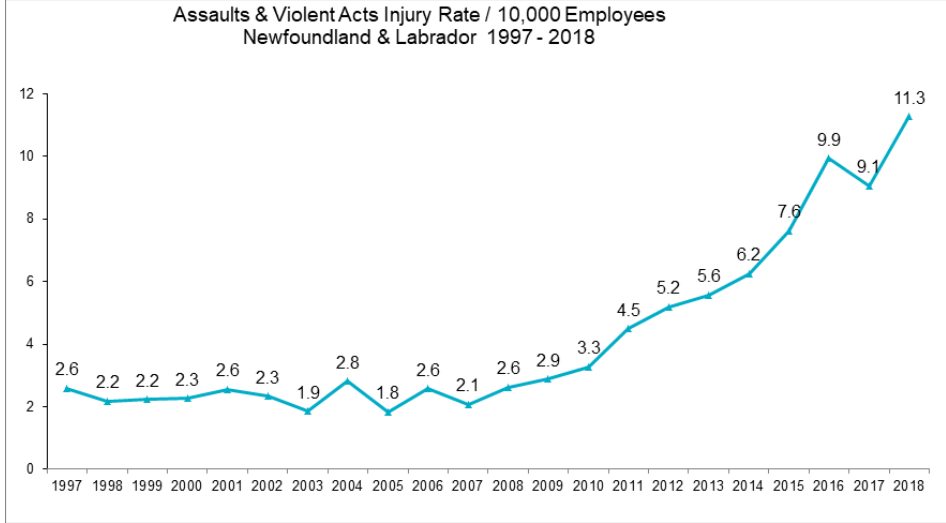
<b>Mandate</b>	<i>Defines expectations / responsibilities. Facilitates better focus on objectives and activities by which the committee operates.</i>
The AWCBC Compensation & Benefits Committee works collaboratively to share experiences, identify and improve claim-related outcomes and identify and action opportunities around operational, research and policy development initiatives.	

<b>Goals</b>	<i>Based on your mandate, set realistic and specific goals. What is the long-range aim? What do you hope to achieve?</i>
1. To share jurisdictional experiences and knowledge.	
2. To put before the committee, emerging issues that are deemed high priority, for consideration of planning	
3. To identify, plan, and carry out specific projects for the benefit of the committee members and their respective jurisdictions.	
4. To be available to other AWCBC / national committees to provide input and or partner with when requested.	
5. To provide feedback to AWCBC Executive when required or requested.	

## Return to Work Outcomes

<b>Objectives</b> <i>Improving Return to Work Outcomes/Reducing Durations (Share work that is being done within your organization to support RTW, reduce duration etc)</i> <ol style="list-style-type: none"> <li>1. <b>Organizational Changes to support RTW</b></li> <li>2. <b>New Initiatives</b></li> <li>3. <b>Best Practices</b></li> <li>4. <b>Outcomes</b></li> </ol>	<b>Activities</b>	<b>Target Date(s) / Status</b>	<b>Budget</b>
<p>Vocational Rehabilitation</p> <ul style="list-style-type: none"> <li>• Job Development – What services do you provide to ensure workers find employment?</li> </ul>	<p>WorkplaceNL provides Labour Market Re-Entry (LMR) services to ensure workers have the skills, knowledge and abilities to successfully re-enter the workforce. The capacity to work and earn is the relevant factor, not availability of employment.</p> <p>A LMR Assessment is conducted to determine whether a worker has existing transferrable skills or requires additional training to enhance their skills to re-enter the workforce. A minimum of 3 labour market re-entry options are usually identified to assist in the development of a LMR Plan with the injured worker. The LMR Plan can involve direct entry (where no additional skill training is required), retraining (upgrading and or formal), self-employment, or on the job training (OJT). Employment Readiness services are available which provides up to 6 weeks of wage loss benefits, as well as one-on-one employment counselling services to assist in resume development, job search skills, interview skills, supported job search, etc. The latter can be provided at any point during the claim when it would most benefit the injured worker. WorkplaceNL also provides injured workers with the option to avail of a one week skills enhancement - introductory computer training program when applicable. The goal of this training is to provide injured workers with a basic knowledge and comfort level with computers.</p> <p>A LMR program review completed in 2018 identified 12 recommendations to enhance the LMR program. These recommendations involved the following key themes:</p>	<b>All</b>	

	<ul style="list-style-type: none"> <li>• maintain worker connection with the preinjury employer;</li> <li>• earlier involvement of LMR where applicable to assist with workplace re-integration</li> <li>• integration of ESRTW and LMR programs as opposed to being separate and independent of each other</li> <li>• increased focus on employer accommodation to the point of undue hardship</li> </ul> <p>These recommendations will be implemented over the course of the next 2 years. (Recommendations attached.)</p> <p>Do you have a job bank of positions that are available to injured workers?</p> <ul style="list-style-type: none"> <li>• No, WorkplaceNL does not provide a job bank of available employment positions. However, one of the recommendations outlined in the LMR Program review involves the establishment of an OJT database to increase opportunities for injured workers to enhance their skills and re-employment options.</li> </ul> <p>What incentives do you provide employers to hire injured workers?</p> <ul style="list-style-type: none"> <li>• OJT at no expense to the employer</li> <li>• Occupational therapy assistance and ergonomic equipment</li> </ul>		
<p>Medical Marijuana</p> <ul style="list-style-type: none"> <li>• Ongoing discussions</li> </ul>	<p>Provide an update on any new developments relating to approval of cannabis</p> <p>WorkplaceNL does not have a specific policy regarding coverage of cannabis for medical use and each case must be reviewed on its individual merit. In general, WorkplaceNL does not cover cannabis for medical use, as it has not gone through Health Canada's drug approval process, and is not endorsed by Health Canada. The external review division has directed WorkplaceNL to provide coverage in one case, which it determined to constitute exceptional circumstances. To date, all other decisions rendered denying coverage have been upheld at the internal and external appeal level.</p>	<p><b>All</b></p>	
<p>Employee Resilience</p>	<p>PEI to present on their utilization of TEND Academy</p> <p>Yukon to present on their approach to dealing with staff burnout</p>	<p><b>Kate</b></p> <p><b>Susanne</b></p>	

<p>Opioids</p> <ul style="list-style-type: none"> <li>Strategies used by jurisdictions to reduce opioid use</li> </ul>	<p>See attached.</p>	<p>All</p>																																															
<p>Hearing Loss</p>	<p>Ontario audiologist to present on Noise Induced Hearing Loss</p>	<p>Christina Lopes</p>																																															
<p>Health Industry Initiatives</p> <ul style="list-style-type: none"> <li>All jurisdictions to provide an update on initiatives to manage the challenges in the Health Care Industry</li> </ul>	<ul style="list-style-type: none"> <li>Psychological impact – violent injuries – are you seeing trends in injury types?</li> </ul> <p>WorkplaceNL does not track the psychological impact of violence-related injuries. We track workplace violence incidence rates in workplaces, but not the psychological effects of these injuries. Here is the latest incidence rate:</p>  <table border="1" data-bbox="688 646 1627 1166"> <caption>Assaults &amp; Violent Acts Injury Rate / 10,000 Employees Newfoundland &amp; Labrador 1997 - 2018</caption> <thead> <tr> <th>Year</th> <th>Injury Rate</th> </tr> </thead> <tbody> <tr><td>1997</td><td>2.6</td></tr> <tr><td>1998</td><td>2.2</td></tr> <tr><td>1999</td><td>2.2</td></tr> <tr><td>2000</td><td>2.3</td></tr> <tr><td>2001</td><td>2.6</td></tr> <tr><td>2002</td><td>2.3</td></tr> <tr><td>2003</td><td>1.9</td></tr> <tr><td>2004</td><td>2.8</td></tr> <tr><td>2005</td><td>1.8</td></tr> <tr><td>2006</td><td>2.6</td></tr> <tr><td>2007</td><td>2.1</td></tr> <tr><td>2008</td><td>2.6</td></tr> <tr><td>2009</td><td>2.9</td></tr> <tr><td>2010</td><td>3.3</td></tr> <tr><td>2011</td><td>4.5</td></tr> <tr><td>2012</td><td>5.2</td></tr> <tr><td>2013</td><td>5.6</td></tr> <tr><td>2014</td><td>6.2</td></tr> <tr><td>2015</td><td>7.6</td></tr> <tr><td>2016</td><td>9.9</td></tr> <tr><td>2017</td><td>9.1</td></tr> <tr><td>2018</td><td>11.3</td></tr> </tbody> </table> <ul style="list-style-type: none"> <li>Return to work strategies for health care claims/Any strategies for violent injury claims</li> </ul> <p>Eastern Health is the largest integrated health authority in Newfoundland and Labrador with 13 000 health care professionals. Both Eastern Health and WorkplaceNL have worked collaboratively to review data and identify areas within Eastern Health that may benefit from a shared initiative to address injury rates, claim costs and improve safe work practices. The</p>	Year	Injury Rate	1997	2.6	1998	2.2	1999	2.2	2000	2.3	2001	2.6	2002	2.3	2003	1.9	2004	2.8	2005	1.8	2006	2.6	2007	2.1	2008	2.6	2009	2.9	2010	3.3	2011	4.5	2012	5.2	2013	5.6	2014	6.2	2015	7.6	2016	9.9	2017	9.1	2018	11.3	<p>All</p>	
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project is titled “Safer Together Initiative”.

The primary source of a workplace injury in Eastern Heath can be attributed to resident handling, aggression and materials handling. The occupations most affected by those include licensed practical nurses, personal care attendants and registered nurses.

The overall goals are to reduce lost time injuries, increase protection, embrace the Early and Safe Return to Work (ESRTW) program and provide better safety performance outcomes.

The Safer Together initiative objectives are:

- The establishment of a steering committee chaired by the CEO’s of Eastern Health and WorkplaceNL and supported by Executive and various directors
- The implementation of the safe resident handling program with extensions to other sites
- The identification of risk assessment tools/techniques and best practices to develop and implement training for care providers to mitigate the risks of injury due to resident aggression
- The observation and review of best practice evidence to inform the development and implementation of a safe materials training program within Eastern Health
- The reconnection of the injured worker to the workplace as soon as possible following the injury through the ESRTW process

The shared initiative aims to:

- Improve the use of safe work practices among workers
- Heighten awareness of health and safety in the workplace
- Meet legislative compliance for MSI prevention and workplace violence
- Improve management and staff accountability for performing tasks safely
- Enhance the safety culture within the organization
- Improve the ESRTW process through the shared responsibilities of the workplace parties.

Three years into the “Safer Together Initiative” we are seeing the following results:

- Four long term care facilities in the St. John’s region are now self-reliant for the majority of ESRTW issues. We continue to work with a 5<sup>th</sup> site that was added - an acute care hospital.
- Preliminary statistics show that the collaborative approach has decreased the weeks in duration for the new claims on the sites involved.
- The focus on early intervention, coupled with delivering education sessions to all staff at each site, appear to have improved the efficiency of application to WorkplaceNL and expediting return to work plans.
- Regular communication with staff and management at each site continues as we work towards maintaining the self-reliant approach.
- Initial results show that overall the amount of lost time has decreased and the number of ESRTW hours has increased. In addition, the number of full weeks of temporary earnings loss (TEL) benefits paid has been reduced as more injured workers are returning to work earlier than ever before.
- The level of collaboration between Eastern Health and WorkplaceNL has improved. Processes within Eastern Health’s Disability Management team now mirror those of WorkplaceNL. As a result, processes between both organizations have become more seamless.
- Return-to-work strategies are now more easily identified by managers at the site which allows for ESRTW sooner in the claim, without delay.
- We are now in the process of educating all employees at the acute care site (the final site) and this will be completed by May, 2019.

WorkplaceNL and Eastern Health management teams initially met on a monthly basis to follow up on education sessions, share information, and provide monthly statistics on PRIME costs, duration, and types of injuries. Four of the original sites have now been weaned to quarterly meetings as a way to promote self-reliance. However Eastern Health continues to hold monthly internal meetings to discuss these statistics.

WorkplaceNL also arranged a community initiative in June and July,

2018, whereby all physicians, nurse practitioners, healthcare providers and union representatives were invited to a 2 hour information session. This session consisted of a presentation on statistics specific to that region, highlighting the changes in the ESRTW process at Eastern Health and highlighting the roles and responsibilities of all parties in disability management. This was followed by a tour of the new facility, complete with a demonstration of a variety of ergonomic equipment in place to reduce injuries. Feedback regarding the initiative suggests that the dialogue and engagement throughout these sessions was helpful in allowing us to clarify some concerns and challenges faced by both patients and healthcare providers.

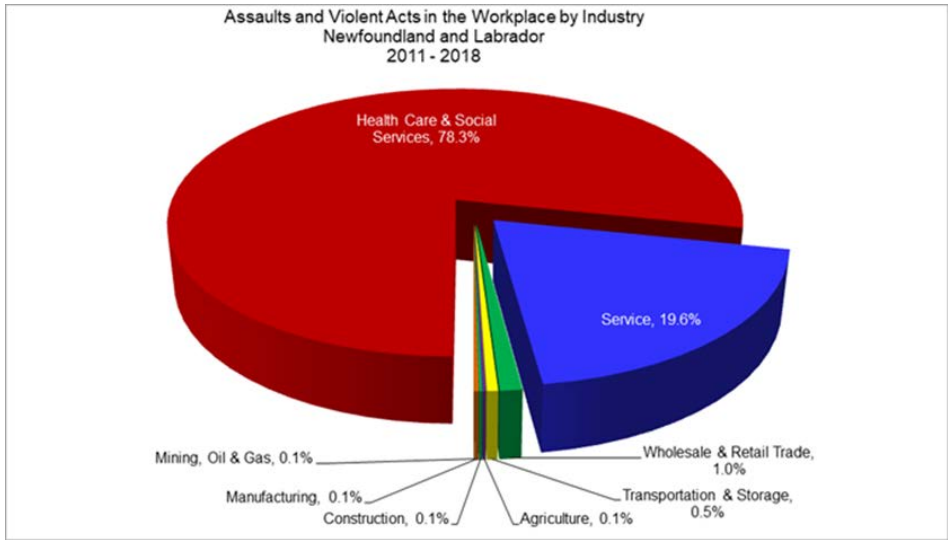
WorkplaceNL hosted the AWCBC National Learning Symposium from Sept 30 to Oct 3, 2018, at which time a presentation was provided regarding the Safer Together initiative.

- For jurisdictions with the Prevention mandate, what are your strategies for preventing injuries

WorkplaceNL's Prevention Strategy for 2018-2022 is attached. Within this strategy, workplace violence has been identified as one of eight injury and illness priorities.

As a strategic priority, an internal working group has been created to plan initiatives to support education and awareness to workplaces in the province with a focus on workplace violence. There has also been a legislative change regarding workplace violence and harassment; therefore WorkplaceNL is collaborating with the OHS Division of Service NL to educate on the topic.

From a trending perspective, the health care industry accounts for the majority of claims involving assault and violent acts. Health and Safety advisors are assigned to the health care industry and work with the health authorities on key issues within their industry including workplace violence.



Fall Meeting

- Discussion of host province and topics to include in the Fall 2019 meeting

**All**



## Service Delivery/Quality Initiatives

<b>Objectives</b> <i>Service Delivery/Quality Initiatives</i>  <i>Share what is being done in your organization to improve Customer service delivery and to support Quality service/decisions to stakeholders.</i>  <b>1. New Initiatives</b> <b>2. Best Practices</b> <b>3. Outcomes</b>	<b>Activities</b>	<b>Target Date(s) / Status</b>	<b>Budget</b>
<p>What is being done to improve customer service.</p> <ul style="list-style-type: none"> <li>• New initiatives</li> <li>• Best practices</li> <li>• Outcomes</li> </ul>	<p><b>Development of a Case Management Unit to Manage Mental Health Claims</b></p> <p>In order to take a proactive approach to the management of mental health injury claims, WorkplaceNL is developing a case management unit specifically to manage mental health injuries. A manager and team lead resource has been reassigned to this unit, in addition to the recruitment of 3 new case management resources. We are also in the process of recruiting a Psychology Consultant, through an RFP process, for this team.</p> <p><b>Partnership with the Canadian Health Awareness Network Newfoundland and Labrador (CHANNAL)</b></p> <p>WorkplaceNL is working closely with this organization exploring opportunities to increase supports for decision makers in managing claims for work-related mental health injuries. .</p> <p>CHANNAL will be facilitating Peer to Peer Support training for five Team Leads in Claims Services which is scheduled for the week of May 27th to May 31st, 2019.</p> <p>This initiative is one of the first steps taken in developing resources and support for claims services staff in anticipation of increased involvement with workers dealing with compensable PTSD and other significant conditions. The purpose of the training is to provide several of the Team Leads with enhanced strategies and knowledge to support staff engaged in difficult and emotionally challenging discussions/reviews/decisions, not</p>	<p><b>All</b></p>	

only related to mental illness claims, but also to fatality, occupational disease and serious injury claims.

This is a starting point and as this initiative evolves, the need for additional related training within Claims Services will be reviewed and provided as required.

**Partnership with the Canadian Mental Health Association**

The Canadian Mental Health Association continues to deliver Mental Health First Aid Training to front line staff.

**Partnership with the Association of New Canadians (ANC)**

Based on employee feedback, the Client Service Working Group identified the ANC as a potential community partner to help us address the needs of the changing workforce in Newfoundland and Labrador. Over the next year, we will be working with the ANC on a cultural intelligence project to measure our cultural intelligence capacity and educate us on how we can improve service delivery across cultures.

The Association for New Canadians is a non-profit, community-based organization dedicated to the provision of settlement and integration services for immigrants and refugees. For over 35 years, the Association has delivered programs and services designed to support all aspects of newcomer integration, ranging from settlement information and orientation, to language learning, skills development and employment.

Representatives from both organizations have teamed together to discuss opportunities for growth and ways to increase cultural intelligence through various lines of business for all stakeholders.

Employees participated in an anonymous, web-based Cultural Intelligence questionnaire. The ANC compiled all of the survey findings and shared the combined results at debriefing sessions held in the Fall of 2018. During the debriefing sessions the Cultural Intelligence assessment findings were reviewed with the organizational business teams.

ANC representatives will also be completing focus group sessions with the WorkplaceNL client facing teams. Through focus sessions, ANC representatives will gain an understanding of the current client service practices of WorkplaceNL with the goal of identifying areas of

	improvement from a cultural intelligence perspective. Information gathered from the Cultural Intelligence questionnaire and the focus group sessions will be used to develop training to be delivered to all employees.		
Customer/Client Service Training	<p><b>Cultural Intelligence Training:</b> The Association of New Canadians will be providing training sessions to all employees of WorkplaceNL with the goal of improving the organization’s ability to deliver services across cultures.</p> <p><b>Letter Writing Training:</b> Training is planned for all decision makers on letter writing skills that focus on clarity and the use of plain language.</p> <p><b>Unreasonable Complainant Conduct Training:</b> Training is being planned for front line staff about using strategies aimed at client behavior that is considered unreasonable and disruptive.</p> <p>The Unreasonable Complainant Conduct (UCC) model was originally developed in Australia and has been adopted by several workers compensation boards across Canada.</p> <p>The vast majority of clients who make complaints against organizations do so appropriately. Less than 1% of the client population display nuisance, problematic, or harassing behaviour. Developing a UCC model will help an organization address a client’s behaviour when their behaviour/conduct is determined to be unreasonable.</p> <p>UCC is defined as any behaviour by a current or former complainant which, because of its nature or frequency, raises substantial health, safety, resource or equity issues.</p> <p>UCC behaviour is generally categorized in 5 broad categories; associated strategies have been developed to deal with each type of problem behaviour. The categories are:</p> <ul style="list-style-type: none"> <li>• Unreasonable persistence</li> <li>• Unreasonable demands</li> <li>• Unreasonable lack of cooperation</li> <li>• Unreasonable arguments</li> <li>• Unreasonable aggressive/violent behavior.</li> </ul> <p>Senior management will ensure relevant systems, policies and procedures are in place to manage complaints and unreasonable complainant conduct.</p> <p><b>Suicide Intervention / Safetalk Training:</b> All case managers are trained and are receiving refresher training in suicide intervention. Other front line</p>	<b>All</b>	

	staff are receiving “Safetalk” training in order to identify individuals at risk of self-harm to connect them with a case manager who is trained in suicide intervention.		

## Human Resources/Training

<b>Objectives</b> <i>Human Resources/Training</i> <i>Share information on staff related issues including training, recruitment, management oversight etc..</i>	<b>Activities</b>	<b>Target Date(s) / Status</b>	<b>Budget</b>
<ol style="list-style-type: none"> <li>1. Staffing Issues</li> <li>2. New Initiatives</li> <li>3. Training</li> </ol>			
<b>Internal Training</b> <ul style="list-style-type: none"> <li>• Internal Training – Jurisdictions to review and provide the committee with information around inter jurisdictional training opportunities. i.e: staff attending training sessions offered by other jurisdictions, train the trainer opportunities, etc.</li> </ul>	N/A	<b>All</b>	


## Emerging issues/Changes in Policy or Legislation

Objectives <i>Emerging Issues/Changes in policy or Legislation</i>	Activities	Target Date(s) / Status	Budget
<b>1. Share information that is related to changes in legislation, policy and other significant changes within your organization</b>			
Medical Marijuana <ul style="list-style-type: none"> <li>anything legislative or policy related to be updated here</li> </ul>	WorkplaceNL does not have a policy or guidelines/criteria in place regarding cannabis. However, our Health Care Entitlement policy, Policy HC-13, is under review to determine if policy revisions are required to clarify that WorkplaceNL will cover health care services when it is consistent with standards of health care practices in Canada.	<b>All</b>	
Any changes in policy	<p><b>Mental Stress EN-18:</b> WorkplaceNL revised this policy in March 2018 to broaden coverage to include coverage for exposure to cumulative traumatic events and to extend coverage to occupations that have inherent risk of exposure to traumatic events such as first responders.</p> <p>Amendments are now required to this policy to include legislative amendments to the Act made on December 5, 2018, which will provide presumptive coverage for work-related post-traumatic stress disorder (PTSD) for all workers covered under the Act for injuries that occur on or after July 1, 2019.</p> <p><b>Justice and Merits EN-22:</b> This is a new policy approved by the Board of Directors in December 2018. The policy provides guidelines on applying</p>	<b>All</b>	

	<p>the merits and justice principles to decision making. These adjudication principles require that WorkplaceNL recognize cases where exceptional circumstances exist and ensure the decision rendered is fair and reasonable considering those circumstances.</p> <p><b>Hearing Loss, Policy EN-12:</b> Amendments are being proposed to this policy to clarify how an audiogram is considered when determining entitlement to noise-induced hearing loss in light of the Nova Scotia Court of Appeal decision concerning the policy requirement to have an audiogram completed within 5 years of leaving employment. The proposed revisions will clarify the factors considered and weighed in the adjudication of hearing loss claims, particularly in instances where an audiogram has not been completed within five years of the most recent occupational noise exposure. The proposed revisions must now go through the required approval process.</p> <p><b>Earnings Loss Benefit Calculation, Policy EL-01:</b> This policy was updated in December, 2018 to reflect the new income replacement rate of 85%.The policy is under further review to ensure that the policy is fair and reasonable and reflective of the current employment circumstances that exist today.</p> <p><b>Health Care Entitlement, Policy HC-13:</b> In light of adjudicating medical cannabis, this policy is under review to determine if policy revisions are required to clarify that WorkplaceNL will cover health care services when it is consistent with standards of health care practices in Canada.</p>		
Any changes in legislation	<p>Government increased the income replacement ratio from 80% to 85% of net earnings effective April 1, 2018.</p> <p>Government repealed the Pension Replacement Benefit legislation and introduced Retirement Benefit legislation that applies to all workers in receipt of Extended Earnings Loss benefits on or after January 1, 2019. Under this legislation, upon reaching age 65, a worker will be entitled to a lump sum payment representing 5% of their total Extended Earnings Loss (EEL) benefits plus interest. For those who were members of an Employer Sponsored Pension Plan at the time of their injury, the lump sum benefit will be 10% of their total EEL plus interest.</p> <p>Government introduced all worker presumptive PTSD legislation that will apply to all injuries occurring on or after July 1, 2019. In order for a claim to be accepted under the presumption, the PTSD diagnosis must be provided by a psychologist or a psychiatrist.</p>	<b>All</b>	

<p>Any changes that will impact the organization</p>	<p>In the Fall of 2018, WorkplaceNL launched a multi-year Business Modernization Program to help us evolve our systems and processes to better meet our clients' and internal needs. Program changes include introducing new technologies and updating business processes to provide more digital services, automated basic transactions and faster decisions.</p> <p>An external program manager from Western Management Consultants (WMC) has been contracted to help lead the program. We are now recruiting members of the core program team including Project Managers, a Change Manager, Business Analysts, a Learning and Communications Advisor and a Program and Change Administrator. Recruitment is expected to be finalized in April.</p> <p>The program governance structure was finalized in early Q2 and a draft organizational change management strategy was completed. Technical and business pre-work is underway on an Office365 pilot and an Enterprise Resource Planning (ERP) project for the Human Resources and Finance areas. Business process mapping work is expected to start in Q2 for the claims services and prevention areas of the business. Preliminary discussions are underway to determine the approach to other changes related to performance indicators and business analytics.</p>	<p><b>All</b></p>	

## Other Topics/issues happening in the jurisdiction that would be of interest nationally

Objectives	Activities	Target Date(s) / Status	Budget
Committee Structure <ul style="list-style-type: none"> <li>• Format</li> <li>• Structure</li> <li>• Chair/Co Chair succession plans</li> <li>• Terms of reference</li> <li>• Orientation guide</li> </ul>	We will do a quick review of the TOR and selection of a co-chair	<b>Wade</b>	



## KPI's

Objectives: <i>reporting KPI outcomes</i>	Activities	Target Date(s) / Status	Budget
<ul style="list-style-type: none"> <li>• Time to initial payment</li> <li>• Short term duration</li> <li>• Long term duration</li> <li>• RTW outcomes</li> </ul>			
Time to Initial Payment	See attached KPI report that captures all of our reported KPI's.	<b>All</b>	
Short term duration		<b>All</b>	
Long term duration		<b>All</b>	
Return to work outcomes		<b>All</b>	
Any other KPI's that would be of interest	<p>See attached 2018 employer and injured worker satisfaction survey. 2018 year-end survey results indicate employer and injured worker satisfaction with their overall service experience with WorkplaceNL remains at a high level. WorkplaceNL achieved a service improvement index of 76.4 for employers and 78.7 for injured workers.</p> <p>Discussion on whether these current KPIs are still relevant and if there are others we should include in the jurisdictional updates. For example, the number and percentage of injured workers who are placed on long term earnings loss benefits on an annual basis. (For Nova Scotia, we placed 426 workers on long term benefits in 2018. Our annual time loss claim volume for the past 5 years has averaged 5900 TL claims, so on average 7.2% of our annual time loss claim volume ended up on long term benefits in 2018).</p>	<b>All</b>	

## Technological Updates

Objectives: <i>What is new/upcoming in the jurisdiction that will be of national interest.</i>	Activities	Target Date(s) / Status	Budget
<ul style="list-style-type: none"> <li>• <b>Share information</b></li> </ul>			
<p>Case Management Systems</p> <ul style="list-style-type: none"> <li>○ Learning from the case management models</li> <li>Lessons learned</li> <li>Pros and cons</li> <li>Dashboards</li> </ul>	<p><b>- Partnering with our Health Care Services Department to Focus on Educating Health Care Providers</b></p> <p>Work is ongoing through liaison committee meetings, oral and written communication, and collaboration with the Memorial University School of Medicine to help ensure improved knowledge of WorkplaceNL and Early and Safe Return To Work (ESRTW) amongst health care providers. Lectures on occupational medicine were delivered to Memorial University's undergraduate medical students, to create an understanding of ESRTW and the physician's role in facilitating recovery at work. Education sessions were also conducted with postgraduate family medicine residents. These sessions focused on the importance of accurate reporting, the PRIME model, as well as identifying and managing risk factors that may pose barriers to return to work.</p> <p>Health Care Services hosted a Memorial University medical student who completed a two week elective in the discipline of Occupational Medicine.</p> <p>WorkplaceNL continues to offer a Physician Resource Education Program (PREP). The objectives of the program include providing physicians with an understanding of the worker's compensation system, and their role, responsibilities and reporting requirements. Physician education sessions are provided as the need arises. Promotion of disability management guidelines and related resources is part of this discussion, in particular as it relates to healing times.</p> <p><b>- Labour Market Re-entry Program Review</b></p> <p>The Labour Market Re-Entry (LMR) program was introduced as a part of a new return to work model in 2001. The goal of LMR services is to ensure workers have the skills, knowledge and abilities necessary to re-enter the labour market and reduce or eliminate their loss of earnings resulting from the work injury. Many enhancements have been made to improve the quality of the LMR program since its inception in 2001 and</p>	<p><b>All</b></p>	

	<p>WorkplaceNL is committed to ongoing quality improvement in its delivery of the LMR program.</p> <p>In 2018, WorkplaceNL commenced a comprehensive internal review of the LMR program. This incorporated a previously completed jurisdictional scan of the current LMR practices across Canada. The purpose of the review was to explore opportunities to improve LMR services and programming earlier in the lifecycle of the claim.</p> <p>The LMR Program Review outlined 12 recommendations that were approved by the Board of Directors. These recommendations involved the following key themes:</p> <ul style="list-style-type: none"> <li>• maintain worker connection with the preinjury employer;</li> <li>• earlier involvement of LMR, where applicable, to assist with workplace re-integration</li> <li>• integration of ESRTW and LMR programs as opposed to being separate and independent of each other</li> <li>• increased focus on employer accommodation to the point of undue hardship</li> </ul> <p>These recommendations will be implemented throughout 2019 and 2020.</p>		
<p>Update on online services for clients and service providers</p>	<p>WorkplaceNL is exploring new ways to better deliver programs and services in response to emerging issues, including pressures to offer more modern, efficient and innovative service delivery. Our 2017-2019 strategic plan outlines our commitment to technology-based-service delivery and a 'digital-by-design' approach.</p> <p>WorkplaceNL is developing a plan to expand technology-based service delivery for its injured workers. To date, digital access options for injured workers have been limited to information searching on the corporate website and access to training-related services through the Certification Training Registry.</p> <p>In January 2018, WorkplaceNL began adopting mandatory online services for employers. Employees are working with employers to transition them to the online channel, with the goal of having all employers online by the end of 2019.</p>		

	WorkplaceNL embarked on a business and information technology modernization program in 2018. This program will enable WorkplaceNL to meet its commitment to modernize business services and technologies in response to a changing workforce and emerging trends.		
Other Technological initiatives	Included above under the heading “Any changes that will impact the organization.”	<b>All</b>	