



Jurisdictional Update Report

Date: September 8, 2014

To: Compensation and Benefits Committee

From: Ontario Workplace Safety and Insurance Board

Committee Member: Joanne Webb

Committee Mandate	
	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.
Goals	
	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.

Objective	Activities	Target Date(s) /Status
<p>Improving Return to Work Outcomes/Reducing Durations (Share work that is being done within your organization to support RTW , reduce duration etc)</p> <p>1. Organizational Changes to support RTW</p> <p>2. New Initiatives</p> <p>3. Best Practices</p> <p>4. Outcomes</p>	<p style="text-align: center;">Return to Work Services</p> <p>Caseload Activity</p> <ul style="list-style-type: none"> ▪ RTWS - Jan to July 2014, 11,487 referrals made to RTWS. In 2013, there were 20,929 referrals made to RTWS for the year. ▪ WTS - Jan to July 2014 2,803 new referrals. In 2013 there were a total of 3,960 new referrals made to WTS for the year. ▪ Worksite Visits - Jan to July 2014 there have been 16,163 worksite visits (total RTWS meetings + WTS proxy 2.3 visits/referral). In 2013, there were 26,000 worksite visits. <p>RTWS and WT Outcomes</p> <ul style="list-style-type: none"> ▪ January to July 2014, 88% of cases remain off full LOE after 1 month following last RTWS meeting. This was 85% in 2013. ▪ January to July 2014, 93% of WT Plans resulting in a RTW with the IE remain off LOE at 3 months post LOE plan. This was 94 % in 2013. ▪ January to July 2014, 81% of completed WT plans (cases with no prior LMR services, excludes OD and SIP) are employed. In 2013 this was 70%. <p>Improving RTWS Services Initiative - Attachment We have continued to improve the timeliness and quality of our RTW services through initiatives such as the streaming of high impact cases and “Closing the Gap”. We have developed an adjusted approach to make it more internally coordinated and seamless for the workplace parties. From February to June and from April to June 2014 a new approach to coordinating RTW Services was trialed in London and Toronto-Construction/Transportation respectively. Key focus areas include improving:</p> <ul style="list-style-type: none"> ▪ The understanding of RTWS and WTS roles (both internally and externally) ▪ CM positioning of referrals ▪ Collaboration between field roles - RTWS identifying cases requiring WT services, positioning the workplace parties for WT services and setting up the WTS at the conclusion of RTWS involvement 	<p>YTD 2014 as compared to 2013</p> <p>YTD 2014 as compared to 2013</p> <p>Q1, 2014</p>

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	<p>Key successes to date:</p> <ol style="list-style-type: none"> 1. Greater collaboration and understanding of roles 2. Positioning by Case Manager and RTWS resulted in efficiencies and improved customer service 3. Improved timeliness of RTW services <ul style="list-style-type: none"> • Cases referred to RTWS within 6 weeks of DOI has improved by 10% during the trial periods in both locations. 90% of cases in London are now being referred to RTWS within 6 weeks and 80% in Toronto COTR • Median time to First WTS Referral from DOI has improved during the trial period in both locations Direct to WT from CM: 6.06 mths (London) and 6.57 mths (Toronto COTR) Prior RTWS involvement: 2.89 mths (London) and 3.01 mths (Toronto COTR) 4. Increased RTW outcomes achieved earlier and across all roles <ul style="list-style-type: none"> • There has been an improvement in the percentage of workers who remain off full loss of earnings benefits at 1-month, 2-months and 3-months post RTWS intervention for both trial locations 5. Improved employer satisfaction results <ul style="list-style-type: none"> • Employer satisfaction with RTWS services has remained at 90% in London and has risen from 83% to 90% in Toronto COTR since the launch of the trials <p>Evaluation of the initiative is underway and adjustments are being made to the referral criteria and to case positioning conversations before rollout begins to other areas.</p> <p>RTWS Training Return to Work Specialists will be receiving Job Analysis and Job Accommodations training. This training will include a module specific to the progression of RTW plans for shoulder injury cases as these continue to be challenging cases.</p> <p>Workers in Training As of June 30, 2014 there were approximately 1,000 attending vocational training and another 400 in Academic Upgrading or ESL. With continued improved RTW rates with the injury employer, training costs continue to decline – approx. 14% reduction year over year when compared to 2013.</p> <p>RTW Services – Audit Team Regular case audits are completed by a small WSIB Quality Services Review Team to identify best practices and opportunities for service improvements. These audits focus on delivery of RTW services by our internal staff and external service providers. An example of a 2014 monthly audit includes the Timeliness to First Meetings for workers and employers for the field staff - RTWS and WTS.</p>	<p>Q3, 2014</p> <p>2014</p>

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	<p>Employment Readiness: Motivational Interviewing Techniques WSIB has developed a training program for Service Delivery staff – Case Managers, RTW Specialists and Work Transition Specialists - to help identify immediately when a worker is “stuck” and hesitant about their ability to RTW, and by using motivational interviewing tools and techniques and “change talk”, help workers move to a state of readiness to RTW. The 1 day training program is delivered to all roles together to further enhance collaboration and case conferencing, and ensure consistent messaging to workers. Early results from a trial are positive. The program is expected to help duration by getting “unmotivated” workers feel ready to get back to work sooner – and then stay there.</p> <p>The program is expected to be rolled out to all Service Delivery staff by early 2015.</p>	Q2, 2014 Trial
	<p style="text-align: center;">Best Practices in Health Care Sector</p> <p>Accommodations Working Group In Q2 2014, Senior Management at the WSIB was approached by various labour groups to form an accommodations working group to help develop a product that would assist WSIB RTW staff, Employers, Labour RTW Representatives, WSIB Claims Representatives and Health and Safety Representatives with improving RTW through job accommodations of pre-injury or alternate jobs.</p> <p>The group agreed that the “product” would be generic enough for use across different industries but contain resources and case study application specific to each industry group. The initial phase of this work is focusing on the Health Care sector.</p> <p>To date the group has drafted an “Approach to Job Accommodation” document to help guide RTW players. The approach promotes engagement between all workplace parties in order to achieve a smooth and successful return to work. The approach document will provide the user with some links to accommodation resources (industry specific) and case studies.</p> <p>Health Care Sector – Daintry Davis, Director In Ontario we do not have specific practices related to RTW for health care workers. We do, however, have a robust RTW continuum that we utilize to assist with RTW. This begins with the Case Manager (CM) who obtains a detailed job description and attempts RTW negotiations with the workplace parties (WPP).</p> <p>If the WPP are not able with the assistance of the CM to resolve RTW issues they refer the case to a Return to Work Specialist (RTWS) who attends at the workplace and looks for solutions through observation of the job duties, accommodations, alternate work and mediation of work issues.</p>	June 2014

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	<p>If the RTWS is not successful in negotiating RTW and the worker is not progressing to a full recovery, the Work Transition Specialist (WTS) is referred to the workplace. The WTS has expert training and is often able to secure a sustainable RTW.</p> <p>The CM, RTWS and WTS work collaboratively to resolve RTW issues in the HC industry where there are specific challenges particularly with Personal Support Workers (PSW) who do heavy work and have few additional skills. It is early intervention that contributes to success in these cases.</p> <p>Risk Factors for New Claims</p> <p>High Impact claims include low back, shoulder and fracture cases. A review of our program initiatives began in 2014 with a focus on shoulder cases. Recommendations have been made to demystify the case management of shoulder injuries with a focus on pre-surgery planning for RTW.</p> <p>In order to promote consistent and improved performance in return to work and recovery of Shoulder injuries, a trial of case managers (CMs) dedicated to shoulder injuries only will begin the end of September 2014. Dedication of shoulder cases will provide CMs and nurse consultants (NCs) the opportunity to focus on shoulder cases, develop and apply best practice approaches and improve outcomes. These teams will receive training on September 29, 2014, focused on best practices for managing shoulder cases, as well as how to accommodate and negotiate return to work.</p> <p>Plans are in place to provide additional skills to RTWS/WTS in accommodating shoulder injuries.</p> <p>Attention will also be focused on improving RTW results in Fracture injuries. A comprehensive review of results to date, analysis of what has assisted in improving return to work when there is a fracture, as well as case reviews will be conducted in Q4 2014 leading to recommendations for improvement in the management of fracture cases in 2015.</p> <p>We have experienced significant success in the management of low back cases and there will be a review of this work as well to capitalize on best practices in case management.</p> <p>MTBI cases also pose a challenge to staff so training is being provided - training focuses on accommodations in the workplace following a MTBI.</p>	<p>Fall 2014</p> <p>Training, Q2, 2014</p>

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<p>Service Delivery / Quality Initiatives Share what is being done in your organization to improve Customer service delivery and to support Quality service/ decisions to stakeholder)</p> <p>1. New Initiatives 2. Best Practices 3. Outcomes</p>	<p style="text-align: center;">Telephone Quality Service (TQS)</p> <p>The Telephone Quality Service (TQS) program integrates technology, process and people. The objective of the training program is to enable staff to provide consistency and quality customer service in their interactions when using the telephone when dealing with workplace parties</p> <p>The program outlines how to use the technology and introduces a quality program based upon best practices on how to conduct effective customer focused, goal oriented telephone conversations</p> <p>Calls are recorded for quality/coaching purposes and staff are provided with feedback that is benchmarked against quality goals, experience and business drivers to continuously improve return to work (RTW) and recovery outcomes.</p> <p>The TQS program will enable the Workplace Safety and Insurance Board to:</p> <ul style="list-style-type: none"> - Improve business outcomes (i.e. rtw and recovery) through enhanced communication skills of our staff. - Have consistent, responsive, quality communication with our Work Place Parties - Drive to a higher rate of accessibility - Coach and support continuous improvement - Assess team and individual performance against standards for service excellence. <p>In the first six month of the TQS launch there was a 50% drop in complaints regarding a lack of return phone calls. Customer satisfaction index scores also increased in the same period.</p> <p>Staff report the conversation framework improves the information exchange with workplace parties and reduces overall time on the phone which is supported by the data. In the past year the live answer continues to steadily increase as do the quality scores. Managers listen to calls with staff and provide coaching to maximize opportunities to support return to work and recovery goals.</p>	

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<p>Service Delivery/ Continued work with Fed Government related to Migrant workers.</p> <p>Each jurisdiction will provide information around their current claim handling process for Migrant workers. Best practices to be identified.</p>	<p style="text-align: center;">Foreign Agricultural Worker (FAW) Claims - Attachment</p> <p>Coverage summary - WSIB coverage for temporary foreign agricultural worker begins as soon as they reach the agreed upon point of departure in their homeland. Coverage remains in place until they return to their country.</p> <p>While travelling in Ontario – workers are covered as follows:</p> <ul style="list-style-type: none"> • While in transit to/from the airport to the employer’s premises • When using transportation authorized by the employer • When using a direct, uninterrupted route to or from the employer’s premises. • They are also covered during periods of leisure, meals and while sleeping while staying in employer-provided quarters. <p>The majority of injured FAWs are a part of the Seasonal Agricultural Worker Program (SAWP). To a lesser degree we may see injured FAWs from the Agricultural stream or the stream for lower skilled occupations (overseen by HRSDC / Service Canada).</p> <p>Once a claim is allowed and if there are ongoing Recovery or Return to Work (RTW) issues the FAW claims are transferred to 1 of 3 dedicated Short Term Case Manager (STCM) with the Agriculture sector for handling. There is one exception – if a FAW case is identified as “high impact” (low back, fracture, shoulders) they are routed to the high impact case manager.</p> <p>Case Management of FAW Cases - The STCM deals with the worker and the employer to gather and provide necessary information as it relates to recovery (medical, therapy, treatment) and RTW (lost time, no lost time, suitable work). STCMs may also connect with Liaison Officers for SAWP workers – these officers act as worker representatives (although their representation is limited and does not include the ability to appeal a claims decision or represent the worker in an appeal).</p> <p>If the nature or seriousness of the injury completely prevents a worker from returning to any type of work, the worker is entitled to full Loss Of Earnings (LOE) benefits, provided that the worker co-operates in health care measures as recommended by the treating health practitioner and approved by the WSIB. If appropriate medical treatment cannot be provided in the home country and is required beyond</p>	

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	<p>the normal repatriation date, the WSIB will pay for room & board so the worker can receive optimal medical treatment in Ontario</p> <p>The focus of a worker within the FAW program is identical to other workers – return to work with the injury employers. However, the STCM needs to be cognizant of the repatriation date of the FAW (when the worker is returning to their home country). Should this be scheduled during the health care portion of the claim an expedited Regional Evaluation Centre (REC) assessment is implemented. This expedited assessment with a physician is done within 2-3 days of referral in order to outline a health recovery plan and the worker’s capabilities to return to work. It is important to have this information as medical information from the worker’s home country, once repatriated, can be difficult to obtain.</p> <p>At the same time that the Expedited REC is performed, a Work Transition Specialist (WTS) interview is conducted with the worker, followed by a meeting with the Incident Employer at the worksite. The WTS will determine if suitable work opportunities exist in the workplace. If there is no suitable work at the employer the WTS will identify a suitable occupation (SO. When determining a SO, the WSIB has regard for the SOs available in the local Ontario labour market where the worker was employed at the time of the work-related injury/illness. Because repatriated workers are out of country and unable to participate in services, the WSIB extends the provision of full LOE benefits for twelve (12) weeks, the equivalent period associated with job search training and employment placement services.</p> <p>A Migrant Worker Report provides quarterly information on programs, claim types, country of origin, recovery status, repatriation, and the number of cases with an expedited Regional Evaluation Centre assessment.</p>	

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	<p style="text-align: center;">Skills Development</p> <p>Staffing Items Maintaining focus on training staff's adult educational professional skills through: <ul style="list-style-type: none"> • Personalized development plans that include external training, internal courses and in-house experiential and mentorship opportunities • Utilizing the recently created facilitation quality assessment tool to review in-class performance and identify areas for celebration and improvement • Development of a new branch onboarding program to ensure consistency in the delivery of in-class training initiatives </p> <p>Business Initiatives Leading the training, design, and rollout for the new software (Accounts & Claims System) the WSIB is implementing. Release 1 for Schedule 2 employers rollout occurred earlier in the year in 2014 and Release 2 for Schedule 1 employers' eLearning training begin Sept. 8, 2014 with the in-class training following that. A blended learning approach with post program support will help the business learn the skills necessary to use the new system.</p> <p>Measures are now available through the new branch performance scorecard. The scorecard is designed to measure the overall performance of the branch by measuring the following elements: <ul style="list-style-type: none"> • New World Kirkpatrick model for measuring return on customer expectations • Customer satisfaction surveys on how Training works with them • Employee engagement and performance through coaching and assessments • Utilization rates of training resources (people, product, infrastructure) </p> <p>New claims information, content and knowledge system (CLICK) system was launched and will now be refined to support the business. The system is designed to house material referenced by staff in the fulfillment of their duties and provide one spot to create, store and update information. With robust filters and searching, the system, first launched in early summer, is seeing adoption rates rise. More content continues to be converted to the new system weekly.</p> <p>Training Last year we delivered just over 15,000 in-class Training Days encompassing New Job Training and Developmental/New Initiative programs that support management and staff.</p> <p>For 2014, in-class training days for New Job Training and Developmental/New Initiative programs are ahead of last year's numbers. This is while continuing to support a separate line of training development and delivery for the board-wide software rollout for approximately 3700 staff and management in over 100 different positions.</p>	<p style="text-align: center;">September 2014</p> <p style="text-align: center;">Q2, 2014</p> <p style="text-align: center;">2014</p>

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	<p>Claim Suppression Study (last reported September 2013)</p> <p>Based on anecdotal evidence, the final report of the WSIB Funding Review “<i>Funding Fairness</i>” identified workplace injury claim suppression as an issue, and called on the WSIB to examine its claim files.</p> <p>http://www.wsib.on.ca/cs/groups/public/documents/staticfile/c2li/mdex/~edisp/wsib011358.pdf</p> <p>To help ensure the fairness and integrity of Ontario’s workers’ compensation system, the WSIB commissioned Prism Economics and Analysis to conduct an independent study of workplace injury claim suppression. The report found that under-reporting by both employers and workers has occurred. But researchers were unable to quantify the magnitude of the problem, or the seriousness of the injuries involved.</p> <p>The Prism study reviewed the research literature on the issue, which included estimates of employer under-reporting and worker under-claiming. It also examined a sample of claim files and enforcement files to identify possible flags that could indicate under-reporting or inappropriate claim withdrawals.</p> <p>WSIB is using the results and recommendations of the Prism study to improve our practices as a precautionary measure to minimize the possibility of claim suppression. This includes capturing additional details into our new claims and accounts system, which may help us identify potential under-reporting in the future.</p> <p>In the limited number of cases of failure to report, we are the only jurisdiction in Canada that prosecutes directly. When appropriate, we prosecute for failure to report, for making false statements, or for failing to report a material change regarding a workplace injury.</p> <p>Individuals can report possible fraud and non-compliance using our toll free line 1-888-745-3237 or by email to sileads@wsib.on.ca.</p>	