

Psychological Injuries

What are the claim volumes in your jurisdiction? Has there been in significant changes in claim volumes in recent years?

- 2019: 3746 claims reported
- 2020: 3596 claims reported
- 2021: 3003 claims reported as of September 30. This is a 10% increase over last year.

Has there been any recent policy or legislation changes concerning coverage?

- 2018: while we had presumption in place for first responders as of 2012, in 2018 new legislation was introduced to make psychological injuries presumptive for all workers in the province, where it could be confirmed that an injury had occurred at work and psychological diagnosis was provided.
- 2021: legislation change essentially reverted back to what we had in place prior to 2018.

What are the current challenges you are experiencing?

- Volume of new claims; however, we're having more challenges with secondary psychological injuries (SPI) than primary. Primary psych injuries are managed by our Special Care Services teams; SPI's are managed by everyone. We've been working on this for a few years though so we are much better at identifying these claims and have provided training for all staff. We also significantly increased the number of contracted providers. Our SCS unit has been instrumental in working with treatment providers (Millard, CBI, Lifemark) to implement new treatment programs, with the most recent program for people with chronic psychological injuries, including those arising from bullying/harassment.
- The recent change in legislation is still being monitored/assessed.
- Although we don't have prevention in our mandate, we are providing employers with training through UFred (Psychological Health and Safety in the Workplace) and have done well with that. We also started education programs for psychological providers across the province with another session occurring in November.

Are there any new initiatives that your jurisdiction is undertaking?

- SCS has a small team of very experienced case managers who are available to help coach all staff in the organization with psychological injury claims.
- Our new Secondary Psychological Prediction machine learning model has been developed and is in the last part of testing. We anticipate it will roll out to staff early in the new year. (**Note that we also got a Duration Prediction model out of this...!).

Have you had any success in identifying effective treatment options?

- See above – treatment has gone well, although sometimes there are delays getting into program, impacted by the pandemic.

COVID-19

What are the volume of claims filed for COVID-19?

COVID-19 volumes:

- To September 30: 13,971 COVID-19 claims have been registered. 11,608 have been accepted and 438 are pending or processed. The vast majority are for essential workers.
- Acceptance rate: 85.8%
- Average duration: 16.4 days
- 28 accepted fatalities
- Our long-term covid caseload has been sitting around 200 for the last several months.
- Acceptance criteria is similar to WSBC (and also with vaccine reactions). We recently published a new Fact Sheet on our website on the topic of how mandatory vaccines may impact RTW.

Have there been challenges in the management of existing claims for COVID-19 and how have you managed these challenges?

- Mainly with the long-term covid claims (see treatment program information below).
- Adjudicators have had workload challenges whenever there is another wave. We've cross-trained other staff to temporarily help out when this occurs.

What has been your experience in terms of effective treatment programs for COVID 19 claims?

Millard Health implemented a new program for covid long-haulers in the spring. Here is the most recent update.

Results are for August due to a 1-month reporting lag:

- Achieved 100% overall client satisfaction with their treatment program experience.
- 80% of program clients reported improved quality of life.
- 90% of clients who returned to work had sustained their work at 90 days post discharge.
- We reached out the GP following the triage assessment 100% of the time.

Highlights (September)

- Completed 16 triage assessments (238 YTD) – 9 referred to the community and 7 to program (134 to community and 104 to program YTD).
- CBI and Lifemark took 1 program referral from Millard (42 YTD) and started doing their own triage assessments on September 13.
- Discharged 10 clients from program (59 YTD) – 9/10 achieved a RTW outcome, 6 returned to work and 3 await accommodation (of the 47 YTD; 39 returned to work and 8 awaiting accommodation).
- 3 clients who were previously awaiting accommodation have now returned to work.
- Actively monitoring 26 clients in the community who we anticipate will require a program when ready.

- We determined the majority of clients without an accommodation are not ready for RE services and we are focused on self-care and leisure activities to help increase tolerances.
- Administered a few post-COVID CFCE's and gathered feedback. All providers agreed the goal was to gauge endurance levels as opposed to measuring functional abilities like lifting capacity. This will include adding a follow up call 2 days post assessment to determine lasting impact such as a fatigue crash.

Has the pandemic had an impact on overall claim volumes and duration for non-COVID 19 claims? Please elaborate on same.

- New claims registered is up by about 16.8% compared to 2020, although most of this is from new covid claims. This is down by about 25,000 claims when compared to the fall, 2019.
- Duration grew significantly last year, and is still increasing but the rate of increase has slowed down. We were at 60.6 days in September, up 1.1 days compared to September 2020. We were at 49 days in the fall, 2019.
- While the unemployment rate in Alberta has fallen to about 8% (down from 11% last fall), it continues to be among the highest in the country.
- Claims costs in TD, VR benefits, health care and permanent wage loss (ELPs) are driving the overall costs above budget and compared to last year.
- We continue to see an increase in secondary psychological symptoms requiring treatment; much of this is pandemic-related

What challenges have arisen from the pandemic and how have you addressed these challenges?

- Virtual treatment – continues where necessary. Some employers don't like this process and we've been providing them with a lot of data on efficacy of virtual treatment.
- Impact on the economy has been significant. We have more workers than ever on VR services.
- The most recent wave has shut down access to treatment including surgeries.

Working from Home

Are your staff continuing to work from home as a result of the pandemic?

- Almost all staff continue to work from home. Exceptions: mail room/ document imaging (and they are very small groups), facilities, security. Staff who are having technical, mental or physical health challenges, or who are new and struggling are able to work from the office.

What challenges have you experienced with working from home and what measures have been put in place to address these challenges?

- Measuring and managing productivity
- Onboarding and training new staff in a virtual environment
- Staff recognition and engagement
- Staff burnout - we are experiencing higher than usual turnover of some staff (case managers in particular), as well as short-term medical leaves. We've hired over 100 CMs and 60 adjudicators so far this year and continue to have workload challenges.
- Many staff are struggling with personal challenges (mostly pandemic-related) as well.

Is your jurisdiction considering, (or already implemented), a long-term working from home program? If so, please provide details concerning same.

- We are proceeding with a hybrid work model. We started communication with staff in May/June and supervisors worked with their staff over the summer to update new work agreements, etc. We had initially planned to start bringing people back to the office in September, however we've delayed until January given the impact of the most recent wave.
- All staff have been set up with office equipment both at home and in the office. Most staff will be expected to come into the office 2-3 days/week, with some exceptions (i.e., new staff).
- We didn't plan to open any other facilities (i.e., gym, cafeteria) until later.
- Staff have until Nov. 30 to confirm their vaccination status.