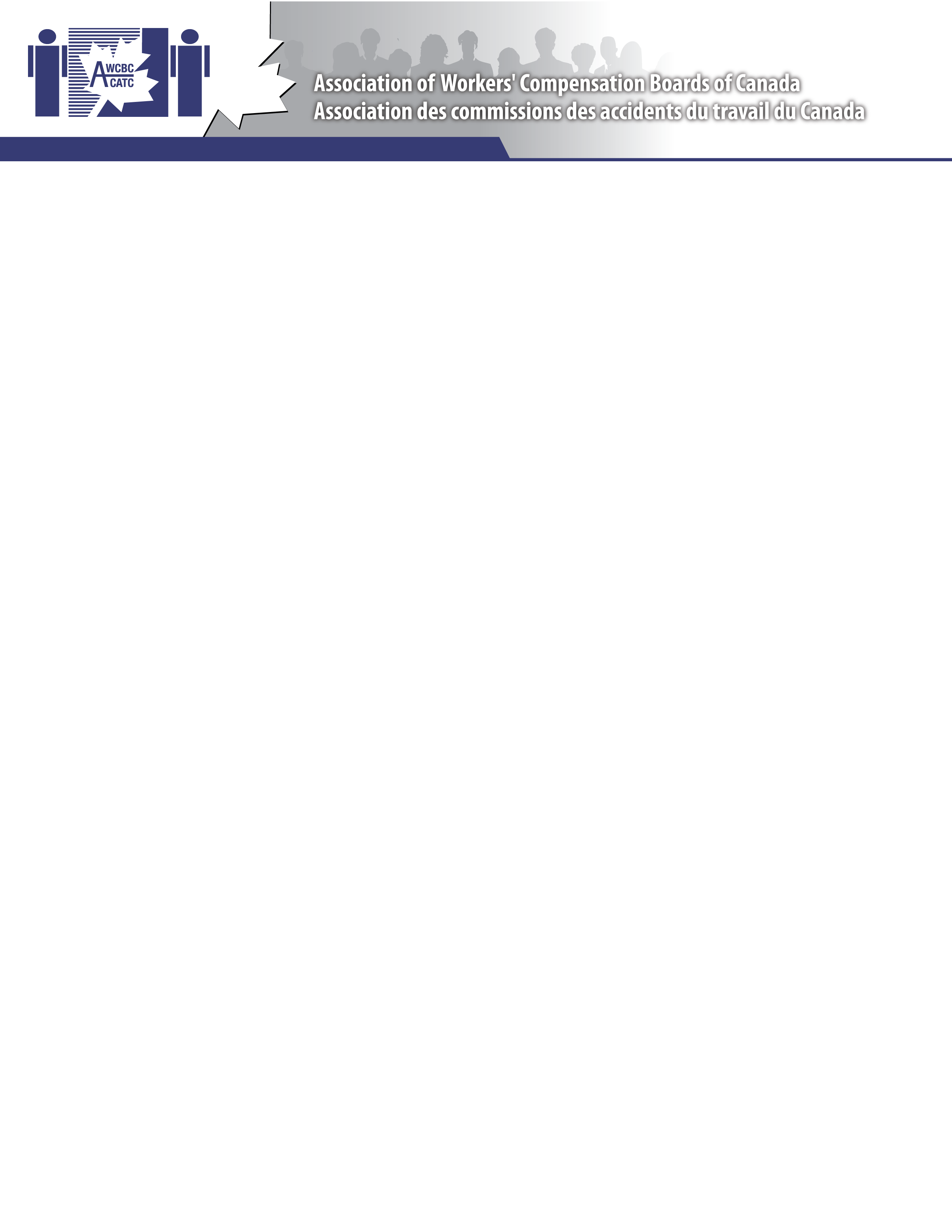
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**Jurisdictional Update Report**

**Date:** April, 2014

**To:** Compensation and Benefits Committee **From: Yukon**

**Committee Member(s):** Karen Branigan

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| **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** | **Budget** |
| --- | --- | --- | --- |
| **Improving Return to Work Outcomes/Reducing Durations**  **(Share work that is being done within your organization to support RTW, reduce duration etc )**   1. **Organizational Changes to support RTW** 2. **New Initiatives** 3. **Best Practices** 4. **Outcomes** | New Initiatives   * Mgr RTW Services is developing a template that supports tracking milestones in return to work cases. We currently have no visual tracking model that helps to identify when cases are slowing down or completely off track. This has resulted in an increase in long term cases that began as soft tissue injuries and became disabilities with psychosocial overlay. This tool can be used for case planning, expectation management with clients, employers in the return to work process and service providers for treatment plans. The process will involve using MDA guidelines as a measure to gauge whether a claim is on track or stalling in progress as well as increasing accountability for decision makers. Immediate action can be taken when milestones are not met by providing necessary oversight. * Working on building a cost accounting model that can be provided to employers to grow their understanding of what injuries at work actually cost an employer. As a small jurisdiction that uses a different rate setting model than larger jurisdictions, employers receive little information about their injury costs. Educating employers about injury costs should assist with the boards’ mandate of preventing disability. |  |  |
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| **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)**   1. **New Initiatives** 2. **Best Practices** 3. **Outcomes** | * Training for claims staff continues using Foundations of Administrative Justice and motivational interviewing. In 2014 additional training on mental health and RTW was also undertaken. |  |  |
| **Emerging Issues / Changes in Policy or Legislation**  **Share information that is related to changes in legislation, policy and other significant changes within your organization.** | * Policy on psychological treatment came into effect in 2013 and implementation continues. This policy was needed to increase mechanisms for concluding psychological treatment when the treatment is not assisting workers to return to work and treatment has no goals or an end date. We have had cases where counselling has continued for years with no appreciable change. Implementation has involved engaging our service providers in education, form development and why our priorities may be different from theirs in treatment endeavors. * 10 ten reasons for amendments to the Workers Compensation Act and the Occupational Health and Safety Act and potential amalgamation of these act has been presented to the Minister responsible for consideration. Our mandate is preventing disability on both the claims and health and safety operations of the business. Our OHS legislation is so out dated that it does not support our mandate and we find great value in claimant services working closely with health and safety on prevention. |  |  |
| **Shared information / opportunities**  **Additional Information / Items** | RTW Indicators   * Time to decision average for 2013 is 13 days * STD 80% rtw within 90 days * LTD 90% rtw within 360 days * These outcomes were consistent throughout 2013. |  |  |