

Schedule 2

Health Services Initiatives Update – POC

April 12, 2023

Objectives for Today's Overview

1. Share updates of the Health Care Strategy and what we heard from Employers, Workers and Health Care Partners
2. Explain the key updates in the new MSK program of care, including admission, structure and delivery of the program.
3. Describe the MSK program of care reporting requirements and how this will help with RTW planning
4. Highlight other areas of change we will share with you over coming 6-12 months

Areas of Opportunity: United front from our Customers and Health Partners



Better Communication leveraging Improved Technology

- Simplified Communication Pathways, less duplication/frequent
- Technology enabled to manage processes, reduce administrative effort, more time to focus on value add activities



Better Understanding & Education

- Better understanding of WSIB claims continuum, processes, decisions and need for certain information, to better support case management teams, and provide services to IIP
- Consistent practices and procedures, and understanding next steps, expectations



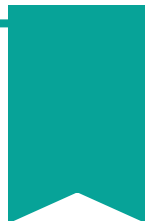
Early and appropriate referrals to ensure access to right care at the right time

- Invest in early intervention, education to connect ppl right care earlier and mitigate long term impacts



Streamlined & Simplified Reporting & Processes

- Streamlined and efficient processes that make it easy & convenient to work with us; more focus on patient care and less emphasis on red tape/ process and consistency in interactions



Better Integration & Collaboration

- Better integration between all stakeholders, between programs and with WSIB Case Management Teams
- Better Linkages with Community Providers and more opportunities to share information seamlessly
- Focus on occupational recovery to optimize RTW outcomes



Customer Centric Navigation

- Where all feel INVOLVED, INFORMED, & SUPPORTED
- Easy to navigate, especially in complex or long duration cases
- Those who felt the process led to an ideal outcome established strong relationship with all partners; those who didn't felt lost and exhausted

Optimizing Recovery Management – Health Care Strategy 3.0

WSIB's VISION

Our Vision is to make Ontario the safest and healthiest place to work and set the standard for **outcomes in recovery, return to work, occupational health care** and claims decision-making



OUR CUSTOMERS

- Injured/Ill Persons
- Employers



OUR PARTNERS

- Health Care Community
- Public Hospitals

HEALTH SERVICES STRATEGIC VISION

To be a leader in occupational recovery management through improved integration in the delivery of health and return to work services, focused on **making good better**, delivered through an effective and value-based health care continuum

OUR STRATEGIC VISION 2023 - 2027



Customer Centric Navigation



Connected & Integrated Pathways and Providers



Access to Right Care at the Right Time



Value Based and Accountable Care



Digitally enhanced connections & services

ACHIEVING OUR VISION - The following system priorities will help us in optimizing recovery management over the next few years

RENEWED RELATIONSHIPS WITH PRIMARY CARE

Address challenges and gaps in access to primary care (e.g. family physicians), leveraging technology (e.g. virtual), regional integration and expanded partnerships

RE-THINKING COMMUNITY CARE

Better and more streamlined access to services (e.g. physio) by reducing red tape, increasing accountability and incentivizing outcomes

ENHANCED SPECIALTY CARE

Leverage existing and develop new partnerships to strengthen access to care, research and innovation for those with occupational injuries and illnesses, supported by streamlined procurement and contracting solutions

TRANSPARENT AND COMPETITIVE FEES

Implement fair and competitive fees focused on delivery of the right care at the right time, to optimize the use of stretched resources

RE-ASSESSING THE DIGITAL ROADMAP

Assess the intersection between technology and health care to make the system more efficient, sustainable and drive value based care, inclusive of data integration and communication

HOW WE WILL MEASURE SUCCESS



Meet our customers' needs and expectations

- Improve access and quality of care, across the province, including remote regions
- Improve sustainable return-to-work and recovery outcomes
- Improved customer experience in recovery management (injured people and employers)

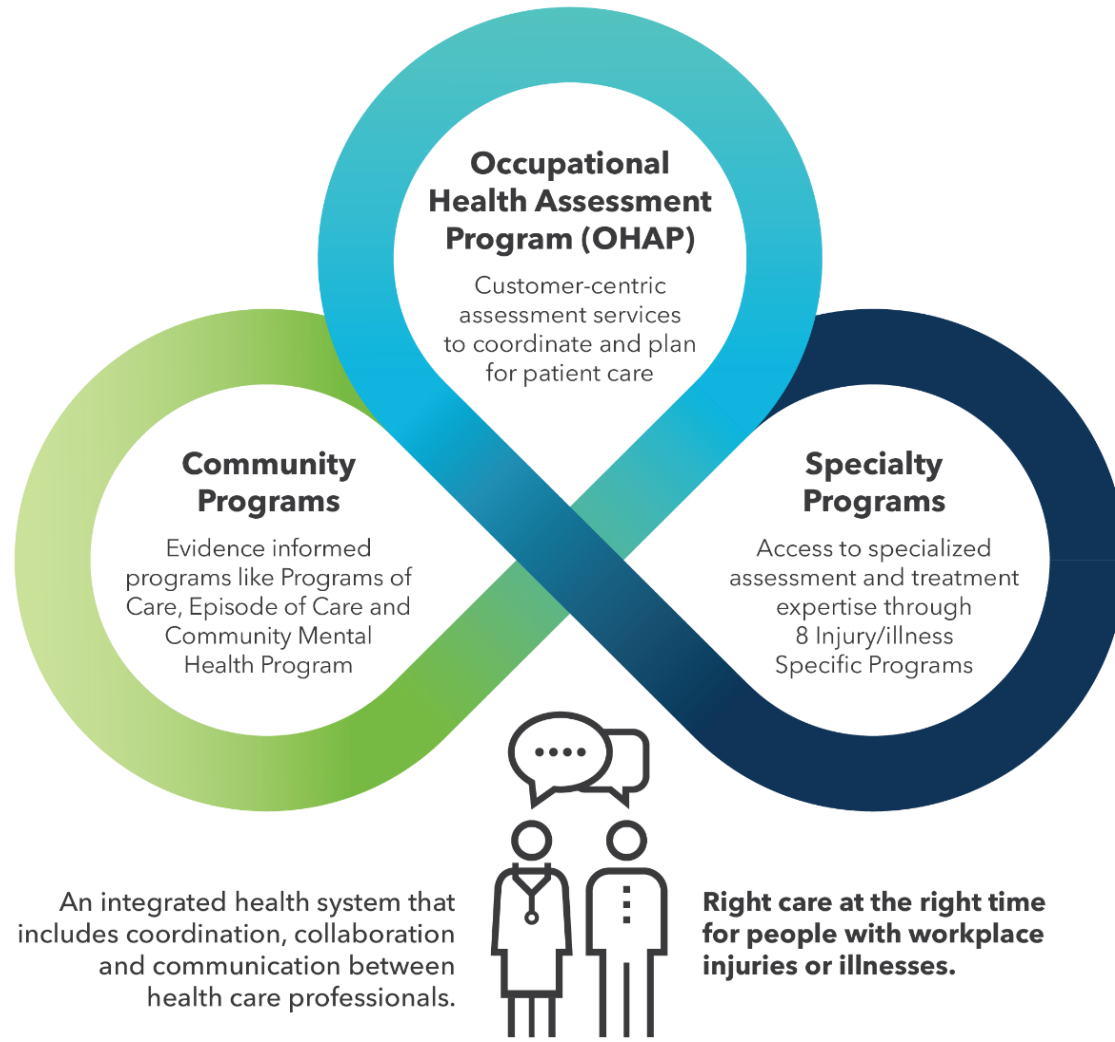
Improve return to work and recovery outcomes

Strengthen partnerships

- Promote a informed health care community
- Ensure right utilization of care, including increased utilization of community care and decreased reliance on specialized care
- Expand and ensure sustainable partnerships, in community and specialized care

Provide health care services in a financially responsible and accountable way

The WSIB's health care continuum



- Non-linear - entry at any point in the continuum based on injury
- Spectrum of services can treat simple injuries or more severe ones that require interdisciplinary, specialist assessment and treatment in hospital setting
- Programs of care are evidence-based programs that are the mandatory first line of care for injured people participating in community treatment who are deemed suitable
- Community health care providers are first line partners in the early identification of complex cases or developing barriers to recovery
- When additional assessment or intervention is required, WSIB can help to facilitate access including expedited access to physician specialists and surgery

Community programs and services: Current state



Need for a refresh: current state barriers



Delayed access to initial healthcare



Four physical injury programs of care with differing criteria and components



Additional care after program completion is not within the program

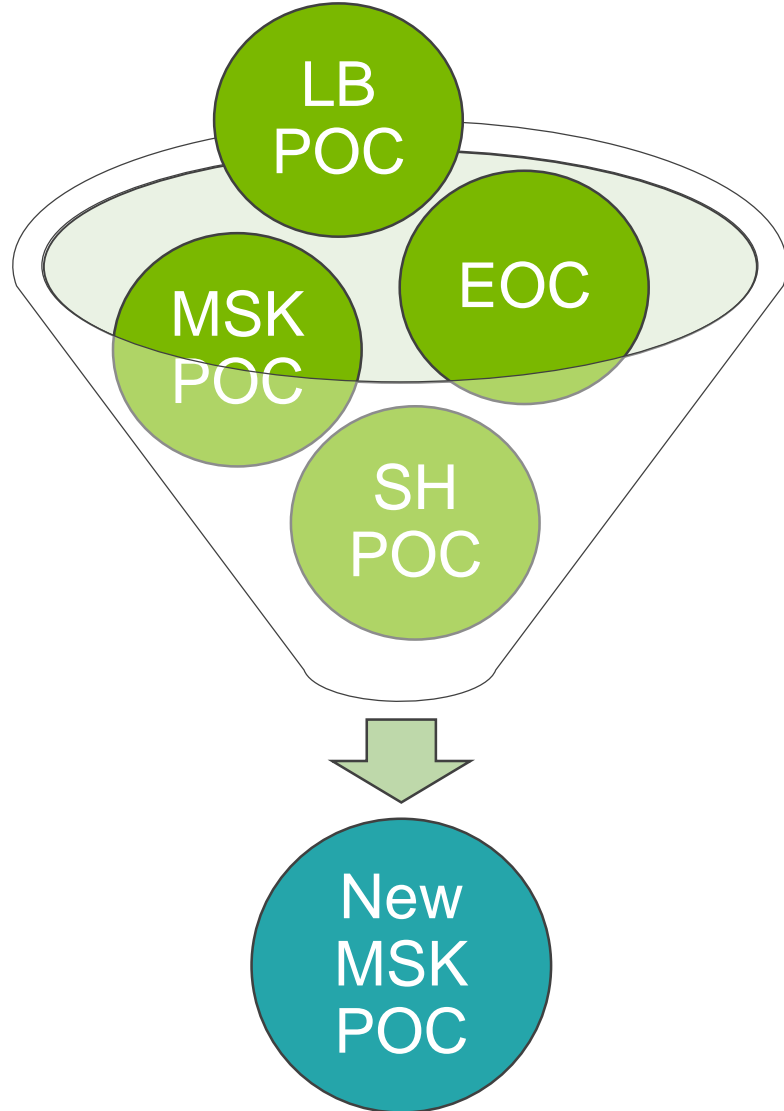


Fees are outdated



Reporting lacks information to support recovery and return to work

The new musculoskeletal program of care



Combines the **Low Back, Shoulder, Musculoskeletal Programs of Care** and the **Non-surgical Fracture Episode of Care** into one comprehensive and harmonized program

- Mandatory first line of care for all suitable MSK injuries
- Eight week program divided into two 4-week blocks of care
- To align to the highly successful low back Program of care and 30% faster entry timelines, Block one is pre-approved for single areas of injury
- Where treatment of multiple areas of injury is allowed, treatment is delivered within the one program
- One set of report templates, regardless of which MSK injury treated, is used to report on both single or multiple injuries
- Where approved, treatment beyond eight weeks occurs within a four week supplementary block

Admission Criteria

1

Timeframe

2

**Suitable
Injuries**

3

Claim Status

- For people who are within 8 weeks from their date of injury
- All MSK injuries including non-surgical fracture
 - Should the health care provider feel that the program is not suitable due to injury complexity, a call to the Clinical Expert is required
- To align to the low back POC, where there is a single injury, block 1 of the MSK POC can be completed regardless of claim status (pending or allowed) to enable early access to care
 - Low back POC has 30% faster average program entry times resulting in decreased time off work
 - Confirmation of an allowed claim is required prior to block 2
 - Where there are multiple injuries, approval is required to confirm entitlement to multiple injuries

Program Structure

The new MSK POC is an eight-week assessment and treatment program consisting of **two blocks** of care.

Entry
**MSK
POC**



Admission criteria met

Mandatory call to WSIB Clinical Expert if worker not suitable, beyond 8 weeks since DOI or multiple zones of injury

4 weeks of treatment

Block
ONE



Initial assessment
and report



Minimum of **5** visits



Mandatory call to WSIB at the end of **block 1** if
entitlement still unknown and/or if there is a **lack of
progress in functional abilities or more than 2 barriers**
identified



Mid-point report at end of
block 1

4 weeks of treatment

Block
TWO



Minimum of **4** visits



Mandatory call to WSIB Clinical Expert **one week** prior to end of
block 2 if the injured person is not expected to make a full recovery
and/or return to work



Care and outcomes summary at end
of block 2

Supplementary Block



- When further treatment is required in specific cases, this treatment will be delivered within a **four-week supplementary block**
- Approval for the 1st supplementary block of care is required via call to the Clinical Expert; approval for a subsequent supplementary block must be given by Nurse Consultant
- This block of care will have bundled fees within the program and a templated report
- A supplementary block would be used in cases where:
 - Identified need for additional treatment (e.g., injured person not fully recovered and performing modified duties with full recovery and return-to-work anticipated)
 - Continued care in the MSK program of care recommended after other assessment (e.g. OHAP, Specialty Program)

Reporting requirements

Initial assessment report

- ✓ Documentation of history of injury (HOI)/mechanism of injury (MOI)
- ✓ Identification of current symptoms, medical history, treatment interventions to date
- ✓ Report of physical examination findings (i.e. MSK, Neurological, Orthopedic, etc.)
- ✓ Administration of outcome measures
- ✓ Diagnosis
- ✓ Identification of barriers to recovery
- ✓ Description of worker functional abilities
- ✓ Identification of treatment interventions to be delivered

Submitted **2 BD** after completion of the initial assessment

NEW Mid-point report

- ✓ Description of recovery to-date
 - ✓ Description of worker updated functional abilities
-
-
-
-
-
-
-
-
-
-

Submitted **2 BD** after last treatment session in block 1

Care and outcomes summary report

- ✓ Description of recovery to-date
 - ✓ Repeat physical examination testing
 - ✓ Administration of outcome measures
 - ✓ Description of worker updated functional abilities
 - ✓ Discharge or description of next steps for recovery
-
-
-
-
-

Submitted **2 BD** after last treatment session in block 2

NEW Supplementary report*

- ✓ Description of recovery to-date
 - ✓ Repeat physical examination testing
 - ✓ Administration of outcome measures
 - ✓ Description of worker updated functional abilities
 - ✓ Discharge or description of next steps for recovery
-
-
-
-

*where Supplementary block approved

Submitted **2 BD** after last treatment session in supp. block

Updated barriers in reporting

6. Summary of physical assessment findings (include examination findings for all areas of injury):

Testing	Findings and details (include pertinent negative findings)
Hand dominance	<input type="checkbox"/> Right handed <input type="checkbox"/> Left handed
Observation (e.g., posture, gait, immobilization status)	
Palpation and range of motion (ROM): (e.g., tenderness on palpation, passive ROM, active ROM, resisted ROM, etc.)	
Neurological testing (e.g., sensory, motor reflexes, strength, neurological tests as needed)	
Relevant orthopedic/special testing:	
Other (specify):	

7. Provide occupational diagnosis(es):

8. Are there any factors that may delay the injured person's recovery and return to work? Yes No If **yes, indicate below:**

<input type="checkbox"/> Fear/avoidance of activity	<input type="checkbox"/> Does not feel ready to return to work
<input type="checkbox"/> Co-morbid conditions	<input type="checkbox"/> "Medium to heavy" job duties
<input type="checkbox"/> Limited support	<input type="checkbox"/> Working conditions and/or shift work
<input type="checkbox"/> Believes hurt equals harm	<input type="checkbox"/> Difficulty transitioning from modified to pre-injury duties
<input type="checkbox"/> Low mood/social withdrawal	<input type="checkbox"/> Does not feel current work duties are suitable

Other (specify):

- Factors, or barriers, that delay recovery can be reported in the relevant section of the report templates.
- If a provider wishes to administer additional outcome measures, they can report on them here, under "Other", and/or submit them with the report

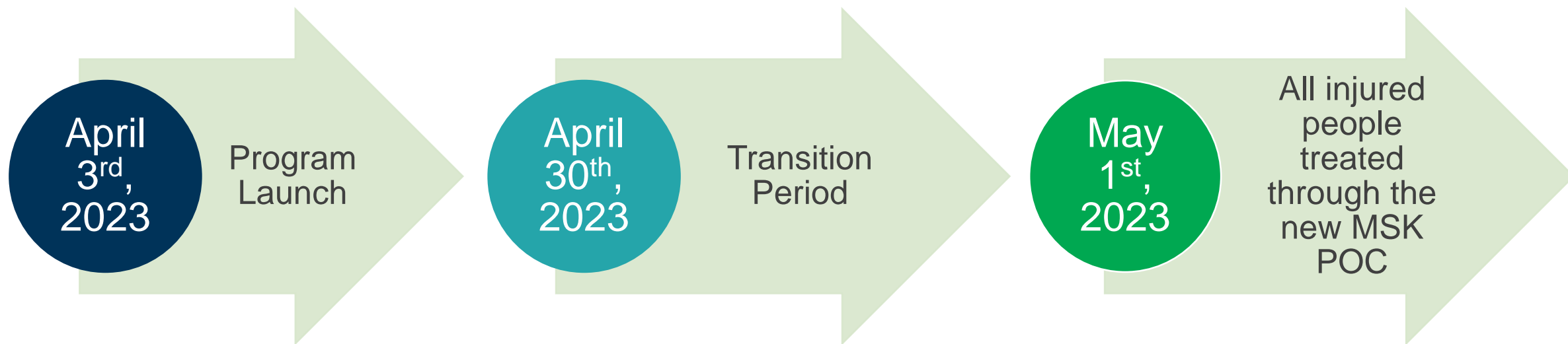
8. Are there any factors that may delay the injured person's recovery and return to work? Yes No If **yes, indicate below:**

- | | |
|---|--|
| <input type="checkbox"/> Fear/avoidance of activity | <input type="checkbox"/> Does not feel ready to return to work |
| <input type="checkbox"/> Co-morbid conditions | <input type="checkbox"/> "Medium to heavy" job duties |
| <input type="checkbox"/> Limited support | <input type="checkbox"/> Working conditions and/or shift work |
| <input type="checkbox"/> Believes hurt equals harm | <input type="checkbox"/> Difficulty transitioning from modified to pre-injury duties |
| <input type="checkbox"/> Low mood/social withdrawal | <input type="checkbox"/> Does not feel current work duties are suitable |

Other (specify):



MSK Program of Care Launch and Transition



- Following the MSK program of care launch, WSIB will be exploring a contracted program in the community (Interdisciplinary Program of Care) for complex injuries further enhancing access to right care at the right time, with a goal to implement by end of 2023
- Specialized care will also be explored in 2023-2024, with a goal to launch a revised program in Fall 2024 that continues to focus on right care at the right time, and address current gaps

Q & A