

ORP Network News

November 29, 2002

1. ORP CONTRACT

The current ORP contract expires at the end of March 31, 2003. In follow up to the discussion that took place at the Provider Education Day – ORP Breakout Session (see below), we are interested in having a discussion group with a representative group of ORP providers to solicit feedback and suggestions for consideration during the upcoming contract review process.

We have scheduled the afternoon of December 12, 2002 and would like up to 9 representatives from the ORP network representing providers from remote and urban geographies as well single program and multiple site providers.

The representative providers will be asked to collect feedback from other providers within their geography or those with similar structure. Teleconference participation will be available for providers outside of the lower mainland.

2. OCCUPATIONAL REHABILITATION PROGRAM BREAKOUT SESSION SUMMARY October 18, 2002

Thank you to all the providers who were able to attend the Provider Education Day. There was an excellent turnout and we appreciate your participation.

1. **Presentation** by Steven Kupidy, OT and Clinic Director at Columbia Health in Kelowna: “Setting ORP Expectations: Challenging The Boundaries Of Rehabilitative Treatment”.

Thanks to Steven for an interesting and thought provoking presentation!

2. ERCS Data Submission

Common Errors

- Missing clients
- Entering incorrect data (e.g. discharge date, birth date, injury date, zero billing days, payee number, wrong ERCS program)
- Encryption errors
- Computer/user issues

How To Ensure Successful Submission

- If your computer is being upgraded, call WCB **in advance** so we can prepare you for the upgrade.

- The number of discharges for the month **must be included in the body of the e-mail** accompanying the export.
- Once an export is received, WCB will respond by e-mail within 2 business days confirming that the file was sent correctly and to confirm the number of discharges per month.
- If you do not hear back from WCB, your file may not have been received. Therefore, check your e-mail on a timely basis and call WCB if you have not received confirmation.

Expectations

- 20-40% of ERCS exports are late or incorrect. This is not acceptable.
- Currently, the export is due by the 3rd business day of the month. As of November 1st, you will have an extra window of 2 business days to submit the export and not be considered late.
- WCB will be monitoring timeliness of exports until the end of the year. If exports continue to be late, there will be financial or contractual consequences to commence at the beginning of 2003.

Note: All requests for corrections to information from providers must be submitted in writing to perudata@wcb.bc.ca. Corrections will no longer be accepted over the phone.

3. Keys To Durable RTW: Strategies From Providers Achieving Consistently High Durable RTW Outcomes

Back In Motion, Chilliwack ORP and Columbia-Squamish have 4-quarter (April 1, 2001 to March 31, 2002) durable RTW averages of 78% to 82%. Feedback from these programs indicates that the following points contribute to a durable RTW outcome for the client:

- Regular and consistent contact with the client, WCB, the employer and attending physician.
- A cohesive team with complementary skills.
- Early contact with the workplace.
- Building relationships with local employers.
- Careful review of the medical history and related information.
- Each client is different and requires an individualized program.
- Consistent follow up with clients who are at work on a transitional or graduated RTW plans.
- Job site visits for job coaching and client support.
- Weekly team meetings to discuss treatment decisions and optimal progression of clients.
- The team is always physically accessible to clients.
- Emphasis on client involvement (i.e. rights and responsibilities, goal setting).
- Clinician experience with the program and clientele.
- Emphasis on self-management skills that are transferable to the workplace and everyday activities.
- Review of home exercise program at discharge and ongoing fitness encouraged.

4. Update On 3-Month Follow Up Survey By Ipsos-Reid

Effective October 11, 2002, Ipsos-Reid will be using a revised phone survey for the 3-month durable RTW follow up call to clients. The revised survey asks fewer questions with the intent of increasing the number of phone calls made and increasing the response rate.

5. Christmas Holiday Closure

Guidelines pertaining to the Christmas holidays will be the same as last year. See information bulletin #2002-15 dated October 29, 2002.

Holiday closure should not result in an extension of the discharge date. It is expected that clients will be provided with appropriate home exercise programs during the closure period.

6. Referral Trends

Despite concerns around the network regarding referrals, 2002 has been the busiest year for the ORP network in most areas of the province:

- The ORP network had the highest number of treated clients ever in Q1 and Q2 of this year.
- The Vancouver region had the highest number of treated clients ever in Q1 of this year.
- The Lower Mainland had the highest number of treated clients ever in Q1 and Q2 of this year.
- Surrey, the Fraser Valley, and Northern BC had the highest number of treated clients ever in Q2 of this year.
- Eastern BC maintains a steady number of treated clients (i.e. no significant changes)
- The number of treated clients on Vancouver Island decreased in Q2 compared to the previous 2 quarters, but was equal to the number of treated clients in Q3 of last year.

7. ORP Contract: Changes Being Considered

The following points were brought up as areas that may be reviewed, changed and/or discussed further for the next contract:

Outcome Measures

- Separate 'maximize function' referrals from the treated clients pool for the purpose of outcome measurement and pay-for-performance incentives.
- Remove minimum requirement and decrease emphasis on 'RTW Without Limitations' discharge status.
- Exclude clients who attend for 10 days or less from outcome measures.

Performance Fees

- Consider a minimum Client Satisfaction Questionnaire response rate for eligibility for the performance incentive fee on client satisfaction rate. The network average response rate for ORP has been > 60% for over 2 years. The minimum requirement for the client satisfaction incentive in the current Work Conditioning contract is a 60% response rate.

- Eliminate performance incentive fees for client satisfaction rates < 8.0. Currently, fees are paid for rates as low as 6.5. The network average has only been < 8.0 for one quarter in over 2 years. The minimum rate for performance fees in the current Work Conditioning contract is 8.0.

Reporting

- Change the Intermediate Report due date to the end of the 3rd week of treatment (rather than the end of the 2nd week as it is currently).
- Attach the \$150 report fee to the discharge report instead of the intake report. Timely submission of discharge report information is more critical for claim-related decision making.
- Clarify preferred method of reporting by consulting clinicians (i.e. physicians and psychologists).
- Clarify expectations for job site visit reports.

Standards Manual

- Decrease caseloads from 15 to 12 (with PT, OT, kinesiologists) including clients on a GRTW. Overcrowding and lack of supervision are the most common complaints about the program. This topic generated discussion surrounding dedication of staff to program, quality of service and enforcement of the current standards.
- Clarify admission and treatment of ‘maximize function’ clients.
- Clarify expectations for monitoring and follow-up of clients on GRTWs.
- Discontinue use of ‘Modified Treatment’ request forms.
- Clarify process for “no-shows”.
- Clarify authorization process for interpreters.

3. NETWORK BULLETINS

The following bulletins have been distributed since the last ORP Network Newsletter:

- 2002-15 – Guidelines Regarding Public Holidays

Please ensure that all of your OR program staff are aware of the information within these bulletins.

Please feel free to contact Duane Endo, Quality Assurance Supervisor (604-231-8895) or Janet Brydon, Program Manager (604-231-8841) should you have any questions or comments.

For long distance calls please call 1-800-661-2112 local 8895 for Duane or local 8841 for Janet.