

Information Bulletin

February 11, 2021

Attention: Occupational Therapy (OT) Services Network

Subject: Job Site Visits (JSV) During COVID-19, Courses, Submission of CPR & First Aid Requirements, Reminder to Include OT Name in Reporting

Job Site Visits (JSV) During COVID-19

Please note that a JSV visit cannot be completed via telehealth. If an in-person JSV is considered a necessary step, it remains the responsibility of the OT to complete the in-person visit in accordance with the guidelines set forth by the Provincial Health Officer, British Columbia Center for Disease Control (BC-CDC), WorkSafeBC, COTBC and the specific employer's requirements.

When a JSV is not specifically required and/or is not possible in person, information regarding the critical job demands may be obtained via a telehealth meeting with the employer and worker in addition to review of any pertinent JDA documents that the employer may have. Consultation with the employer and worker via telehealth for the purposes of confirming critical job demands or GRTW planning **does not constitute a site visit**. Therefore, a JSV visit and report should not be billed in these instances.

First Aid & CPR Requirements

Please submit all **First Aid and CPR certificates** for your Occupational Therapists by emailing Health Care Programs, by **June 15, 2021**, which was the deadline given in RFP 004-2020.

As outlined in Schedule A, Section 26 of the Agreement:

"It is the Contractor's responsibility to ensure that all Rehabilitation Workers and Occupational Therapists possess throughout the term of the Agreement: Current basic first aid and CPR certification obtained in person or online from any provider."

Courses

We have had several questions about “approved” Prolonged In Vivo Exposure courses and would like to remind the network that WorkSafeBC does not endorse a specific or exhaustive list of approved courses for *any* of the Treatment Streams (OT-BI, OT-PI, OT-MH). It is ultimately up to the individual clinicians to research and enroll in professional development that is evidence-based and appropriate for individual learning needs. Moreover, it is expected as with any area of clinical specialty, that the OT only accept referrals that he/she feels able and competent to take.

Further to the above, the OT Services Reference Manual highlights that OTs would be expected to decline referrals wherein exposure therapy is requested for a psychological trauma-related disorder if the OT has not had the appropriate experience (formal coursework, mentorship/shadowing, or both). This is because the clinical approach for exposure therapy specific to trauma-related disorders is nuanced and distinct from approaches for other mental health conditions. Notwithstanding the aforementioned, if there is a mental health treatment provider (e.g. RCC or Psychologist) already involved in the Injured Worker’s care, and the OT is aware that this clinician has been or will be carrying out the in vivo exposure component of treatment, the OT may consider accepting the referral.

Reminder to Include OT Name in Reporting

Per the bulletin issued on January 12, 2021, we ask that all OTs include their printed name beside their signature in the Initial Assessment and Progress Reports. This information is imperative, as it is otherwise difficult for the Board Officer to ascertain which clinician from the company has been assigned to the file when the signature is not legible.

Thank you for your collaboration. We look forward to continuing to work with you.