

# Information Bulletin

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October 11, 2023

## **Attention: Occupational Therapy (OT) Services Contractors**

### **Subject: Safety Risk Assessment and Management when Accepting Referrals**

#### **Safety Risk Assessment & Management**

We would like to remind providers that they are responsible for the development and implementation of their own internal policies and procedures when triaging referrals and assessing for safety risks related to home and community-based OT assessment/treatment sessions.

As with any referral (i.e. worker self-referred or from another funder), when receiving WorkSafeBC referrals the provider is responsible to complete their own risk assessments and manage identified risks to ensure clinician safety. These risk assessments can identify and manage potential hazards and protect the safety and security of attending clinicians. Regardless of whether there are any known/potential risk factors involved with a given referral, providers are expected to have established risk assessment procedures in place and are responsible for training their clinicians on these policies and procedures.

Below are a few resources that may be of interest for the development or refinement of a provider's policies and procedures:

- [Violence Regulation](#)
- [Working Alone](#)
- [Crime Statistics - Vancouver Police Department \(vpd.ca\)](#)
- OT Services Reference Manual - *Threat Management Procedures* (pages 23 & 24).

As a reminder (and as it is outlined in the Reference Manual) it may be the case that for some referrals issued, WorkSafeBC requests that the clinician call the claim owner prior to any contact being made with the worker. Specifically, in some instances, WorkSafeBC will have selected a "Yes" on the referral form in the field marked, "Please call the claim owner for additional information." This indicates that there is additional information that needs to be shared with the clinician, based on specific information that is available to the claim owner at the time of the referral. In these instances, it is imperative that the OT wait to speak with the claim owner before scheduling an injured worker in for assessment.

The following 2-page table is intended to support a provider's internal policy and risk assessment. The "Risk Management Tips" provide additional considerations when a clinician is preparing for any proposed assessment/treatment session. Please be advised that this is not an exhaustive list; rather, it aims to supplement the information and resources that providers are already utilizing.

Potential Risk Factors - Individual	Risk Management Tips
<ul style="list-style-type: none"> <li>• Mental health diagnoses (compensable or noncompensable)</li> <li>• History of substance use</li> <li>• History of real/or threatened use of aggression, violence, suicidal ideation, etc.</li> <li>• History of harassment (e.g. bullying, stalking, racism)</li> <li>• Injured worker presents as confused, irrational, disoriented or delusional</li> <li>• Injured worker does not want to cooperate/participate</li> </ul>	<p><i>Plan Ahead:</i></p> <ul style="list-style-type: none"> <li>• Review referral form. If 'yes' is checked off regarding contacting the claim owner, ensure the OT contacts WorkSafeBC prior to scheduling the worker.</li> <li>• Review Medical Disclosure. Pay particular attention to Psychological Assessment Reports, or other reports from other services providers (e.g. MH Treatment providers, PTSD programs, etc.), regarding safety concerns, or participation.</li> <li>• Initial contact with injured worker. Contact should take place via telephone to conduct initial safety screen as per policies and procedures set by OT provider (see next bullet)</li> <li>• Safety Screen. Providers should develop a series of questions to pose to an injured worker (i.e. safety screen), to determine potential risks to the OT provider and to better inform the safety plan.</li> </ul> <p><i>Examples of questions for safety screening:</i></p> <ul style="list-style-type: none"> <li>• <i>Will the worker be alone or will there be others present – who will be there?</i></li> <li>• <i>Are there any pets?</i></li> <li>• <i>Are there weapons/firearms in the home?</i></li> </ul> <p>Depending on the findings from the risk assessment, a clinician may develop an alternate plan for assessment or treatment (e.g. clinic-based vs. homebased assessment, or conduct visit with a second person), if needed. For exceptional situations wherein alternate arrangements are recommended to manage safety risks, please contact the claim owner and Health Care Programs for discussion and approval.</p>

<b>Potential Risk Factors - Environmental (home, community or work-place)</b>	<b>Risk Management Tips</b>
<ul style="list-style-type: none"> <li>• Injured worker lives or works alone</li> <li>• Injured worker lives with or works with others whom may pose an added safety risk to the provider</li> <li>• Injured worker's home or worksite has a known history and/or risk of violence</li> <li>• Injured worker's home or worksite is located in a geographical area that is considered a hazard</li> <li>• Injured worker's home is located in a remote location</li> <li>• Jobsite visits before or after normal working hours in nonpublic areas or non-high traffic areas (e.g. industrial parks).</li> <li>• Isolated workplaces that do not appear active (i.e. no coworkers, employer or worker representative)</li> </ul>	<p><i>Plan Ahead:</i></p> <ul style="list-style-type: none"> <li>• Provider should be aware of the environment e.g. Where is the geographical location of the house/business? What does the house/business look like (Google maps)</li> <li>• Provider should have a safety plan in place specific for the environment</li> <li>• Plan access routes to and from the site, and develop an exit strategy</li> <li>• If needed, develop alternate plan (e.g. clinicbased vs. home-based assessment, or conduct the visit with a second person. For exceptional situations where-in alternate arrangements are recommended to manage safety risks for an assessment and/or treatment, please contact the claim owner and Health Care Programs for discussion and approval.</li> </ul> <p><i>Prior to Visit:</i></p> <ul style="list-style-type: none"> <li>• Vehicle fuel level is at least half-full</li> <li>• Mobile phone is charged to at least 50%</li> <li>• Keep up to date with local news</li> <li>• Save contact numbers in your phone (managers, coworkers, and police)</li> <li>• Plan visits during regular work hours of the businesses and when others will be around (e.g. supervisors or coworkers)</li> <li>• Plan call in/call out procedures so others are aware you have arrived and left the sight safely.</li> </ul> <p><i>Approaching site:</i></p> <ul style="list-style-type: none"> <li>• Re-assess the risks for the site based on your observations</li> <li>• Drive by the location prior to parking</li> <li>• Do not park directly out front of the location</li> <li>• If you do not feel safe at all, do not proceed</li> <li>• Remain aware of your surroundings at all times. Stay visible. Stick to safe, well-lit areas and do not wear dark clothing at night.</li> <li>• Initiate established safety plan with provider (e.g. call in/call out procedures)</li> </ul>

## Contact us

Health Care Programs

604.244.2171 or 1.866.244.6404 press 2

[otservices@worksafebc.com](mailto:otservices@worksafebc.com)

### For payment status, inquiries, issues:

WorkSafeBC Payment Services

604.276.3085 extension 2

1.888.422.2228 (toll free)

### For Portal help and troubleshooting:

Telus Health Solutions

1.855.284.5900

[Provider.Mgmt5@telus.com](mailto:Provider.Mgmt5@telus.com)

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