

Client Services Policy Manual

Policy Number: **HC-12**
Subject: **Occupational Rehabilitation Services – Private Clinics**
Chapter: **Health Care Services**

Definitions

Licensed Practitioner of Occupational Rehabilitation: a fully licensed occupational therapist or physiotherapist practicing in occupational rehabilitation whose professional services are regulated in and for the province of Newfoundland and Labrador.

Non-Licensed Practitioner of Occupational Rehabilitation: anyone who is not a licensed practitioner, but is knowledgeable in the field of occupational rehabilitation through experience, education or training and is directly involved in the provision of occupational rehabilitation under the supervision of a licensed practitioner.

Memorandum of Agreement: a contract between WorkplaceNL and a contractor that outlines the general obligations and standards for both parties related to the provision of occupational rehabilitation services.

Occupational Rehabilitation: interventions of assessment and treatment that are intended to assist an injured worker to regain the necessary physical, behavioral or vocational function for return to either pre-injury employment or other work and to enable the injured worker to effectively self-manage the condition.

Policy Statement

WorkplaceNL is committed to providing health services for injured workers that facilitate early and safe return to work. In funding private occupational rehabilitation services, WorkplaceNL values and promotes treatment services which focus on:

- Early intervention;
- Progressive activities to improve work-related functional tolerances;
- Education that emphasizes the worker's responsibility in the healing, therapy, return-to-work and prevention processes;
- Early identification and notification of problems that will not be helped by, or that may interfere with, occupational rehabilitation;
- The hierarchy of return to work and accommodation consistent with Policy RE-18 Hierarchy of Return to Work and Accommodation; and
- Effective communication between the health care provider, the workplace parties and WorkplaceNL consistent with the principles of the early and safe return to work provisions of the Workplace Health, Safety and Compensation Act, 2022.

Client Services Policy Manual

Policy Number: **HC-12**
Subject: **Occupational Rehabilitation Services – Private Clinics**
Chapter: **Health Care Services**

Health Care Entitlement for Occupational Rehabilitation

Occupational rehabilitation is a recognized form of health care and covered by WorkplaceNL when:

- Services are referred for the compensable condition by WorkplaceNL;
- Services are provided by or supervised by a licensed practitioner; and
- A Memorandum of Agreement has been signed between WorkplaceNL and the occupational rehabilitation contractor.

Earnings loss benefits may be reduced, suspended or terminated where an injured worker misses occupational rehabilitation services without a legitimate reason or is noncompliant with the treatment plan. Policies EN-17 Interruptions and Delays in Work Injury Recovery or RE-02 The Goal of Early and Safe Return to Work and the Roles of the Parties will be used to guide decisions in these cases.

All Occupational Rehabilitation Services shall be under the direction, supervision and professional practice monitoring of at least one licensed practitioner who has a minimum of one year experience or 1,800 clinical hours of experience in occupational rehabilitation, including but not limited to functional testing, task analysis and goal setting for recovery with return to work and, in addition, four years of experience in other areas of clinical practice in occupational therapy or physiotherapy, for a total of five years of experience or 9,000 clinical hours of experience. Professional practice monitoring requires the licensed practitioner to observe, check and scrutinize for the purpose of ensuring that the goals and the plan are being followed and accomplished in a safe and appropriate manner, according to the goals of the referral and consistent with the professional standards.

General

Occupational rehabilitation services may be used in the promotion of early and safe return to work programs that enable the injured worker to return to suitable employment that is safe and within the worker's functional ability. They may also be used to determine functional ability when identifying suitable employment options for the purpose of labour market re-entry assessment or planning. In some cases, WorkplaceNL may request specific services for the purpose of adjudicating or determining functional limitations regarding health care entitlement.

Workplace parties (employers and workers) are responsible for co-operating in early and safe return to work with support from the appropriate health care provider and WorkplaceNL.

Client Services Policy Manual

Policy Number: **HC-12**
Subject: **Occupational Rehabilitation Services – Private Clinics**
Chapter: **Health Care Services**

WorkplaceNL may assist the workplace parties and the health care provider by offering information or guidance that may be required to aid in the early and safe return to work process.

A referral for Occupational Rehabilitation may be necessary, but is not limited to, cases where the workplace parties require:

- Assistance in determining the worker's functional abilities;
- Information to assist in assessing the workplace in terms of the worker's functional abilities, skills, knowledge and fitness for work;
- Assistance in identifying workplace issues related to the physical demands of the workplace or worksite; or
- Direct intervention to build physical tolerances to enable or facilitate participation in early and safe return to work.

Types of Services

Occupational rehabilitation interventions may include one or more of the following assessments and treatment components:

1. Job Site Analysis (JSA)
2. Work Station Review (WSR)
3. Functional Assessment (FA)
4. Psychological Risk Factors Interventions (PRFI)
5. Worksite Occupational Rehabilitation (WSOR)
6. Clinic-based Occupational Rehabilitation (CBOR)
7. Adjudication Assessment (AA)

- 1. Job Site Analysis (JSA):** An objective evaluation of the tasks of a job, which identifies postures, movements, forces, repetitions, loads and other physical demands of each job task. The physical environment in which the job occurs is also documented, including workstation dimension and layout, equipment, tools and any other factors which affect workers. The worker's presence is not required, but it may be useful for the worker to attend. This service will be performed only by a licensed practitioner or a non-licensed provider whose training has been deemed appropriate by the supervising licensed practitioner. This service may be useful in WorkplaceNL's adjudication process, or in assisting workplace parties to identify physical job demands for early and safe return to work planning and labour market re-entry.

Client Services Policy Manual

Policy Number: **HC-12**
Subject: **Occupational Rehabilitation Services – Private Clinics**
Chapter: **Health Care Services**

- 2. Work Station Review (WSR):** An ergonomic evaluation that analyzes the essential job demands in relation to the worker. The worker must be present to establish anthropometrics (i.e., human body measurements) and individual requirements in relation to workstation layout, measurements, job demands and task organization. This service may be useful in WorkplaceNL’s adjudication process, or in assisting workplace parties to identify issues related to the workstation layout, measurements, job demands and task organization. This service must be completed by a licensed practitioner.
- 3. Functional Assessment (FA):** An assessment that measures a person’s level of function and ability to perform functional or work-related tasks on a safe and dependable basis over a defined period. Data is collected during the assessment and analyzed by the assessor to establish the worker’s current level of function in regards to their ability to perform a variety of job functions. The assessment includes: an explanation of pertinent clinical pathology; identification of client behaviors that impact physical performance; objective musculoskeletal, neuromuscular and biomechanical testing; functional testing; and an assessment of effort. Sound clinical reasoning is essential to identify the important assessment components and to critically analyze all the data collected to clearly answer the referral question. Referral question(s) may be in relation to a specific body part, specific job or specific job tasks. Recommended workday and strength tolerances will be determined based on the referral question. The interpretation and analysis of this data must be completed by a licensed practitioner.
- 4. Psychological Risk Factors Interventions (PRFI):** Disability prevention programs designed to target psychosocial risk factors for pain and disability. Approaches are designed to increase activity levels over the course of a specified period and tailored to meet the rehabilitation needs of the individual worker. Ideally, participants should be between six and 12 weeks post-injury and have return-to-work plans in place, whether it be return to work in pre-injury, or labour market re-entry planning. A licensed practitioner trained in providing psychosocial interventions, and who has this within their scope of practice, should provide the program.
- 5. Worksite Occupational Rehabilitation (WSOR):** An assessment and intervention-based service that occurs at the workplace. The objective is to use graded work activities to progressively improve work-related functional tolerances and knowledge of safe work practices to support recovery and return to work. A WSOR is a highly structured, goal-oriented, individualized, work-oriented program

Client Services Policy Manual

Policy Number: **HC-12**
Subject: **Occupational Rehabilitation Services – Private Clinics**
Chapter: **Health Care Services**

designed to improve/restore physical, behavioural and vocational functions. The focus of WSOR is to provide comprehensive rehabilitation and may include, but is not limited to: monitored and/or graded easeback, modified work, work hardening, and early and safe return to work planning. It is WorkplaceNL's opinion that occupational rehabilitation is best accomplished at the worksite. All reasonable efforts should be attempted by workplace parties and health care providers to facilitate this prior to moving to clinic-based occupational rehabilitation. An occupational rehabilitation treatment intervention at the worksite is designed, monitored and evaluated by a licensed practitioner. The duration of the treatment intervention will depend on the nature of the injury, functional level of the worker, and job demands.

- 6. Clinic-based Occupational Rehabilitation (CBOR):** An intensive intervention program designed to address a worker's functional restrictions as it relates to their job demands. The focus of CBOR is to implement physical and occupational interventions to attain sufficient physical tolerances and other occupational skills for pre-injury job requirements, or, in the event that pre-injury employment is not an option, to attain sufficient physical tolerances for other suitable work. Interventions shall include relevant functional tolerances required for return to targeted work activities and shall consist of simulated graded work activities, targeted conditioning exercises and a home exercise program. CBOR intervention is designed, monitored and evaluated by a licensed practitioner throughout the process.
- 7. Adjudication Assessment (AA):** An objective evaluation that identifies specific job demands in relation to signs and symptoms identified by a worker, which is to be used in adjudicating potential work injury claims. Ideally, the worker should be present to identify environment set-up or equipment design hazards in relation to the worker's anthropometric measurements and individual behavioral requirements. Administrative issues contributing to signs and symptoms, as well as other hazards (not related to the signs and symptoms of the worker) are also identified in the report. An AA must be performed by a licensed practitioner.

Reporting Requirements and Fee Schedule

Reporting requirements and fees payable for occupational rehabilitation services shall be set by WorkplaceNL.

Client Services Policy Manual

Policy Number: **HC-12**
Subject: **Occupational Rehabilitation Services – Private Clinics**
Chapter: **Health Care Services**

Merits and Justice

Where the individual circumstances of a case are such that the provisions of this policy cannot be applied or to do so would result in an unfair or unintended result, WorkplaceNL will decide the case based on its individual merits and justice as outlined by Policy EN-22 Merits and Justice. Such a decision will be considered for that specific case only and will not be precedent-setting.

Reference:

Workplace Health, Safety and Compensation Act, 2022, sections 95, 96, 100, and 103.

Policies:

EN-17 Interruptions and Delays in Work Injury Recovery

EN-22 Merits and Justice

RE-02 The Goal of Early and Safe Return to Work and the Roles of the Parties

RE-18 Hierarchy of Return to Work and Accommodation

Memorandum of Agreement for the Provision of Occupational Rehabilitation Services to Injured Workers

Amendment History

Original Effective Date 2002 12 01

Revision #1 2024 10 17

Next Review Date 2029 10 01