

Traumatic Psychological Injury Program

2023 Program Review Summary



WorkplaceNL

Health | Safety | Compensation

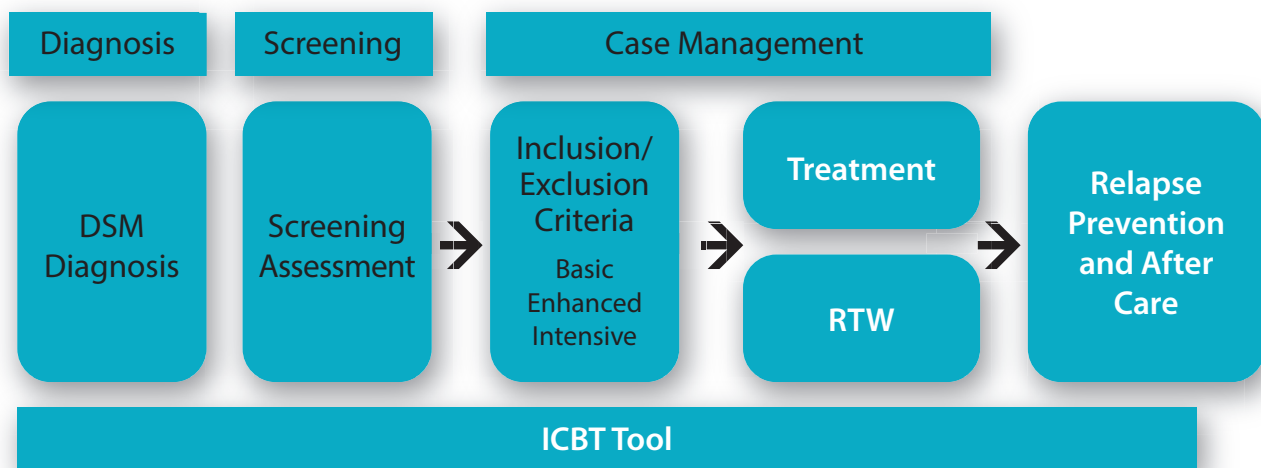
Program Description

WorkplaceNL created a case management team in 2019 dedicated to psychological injuries, arising from traumatic event(s), due to an expected increase in these claims. The team recommended the development of a comprehensive interdisciplinary program, the Traumatic Psychological Injury (TPI) Program. The program provides workers with timely access to specialized care related to their psychological injury. It aims to:

- Assess the injured worker and confirm the presenting diagnosis.
- Provide greater and earlier access to effective, trauma-informed mental health services for work-related injuries.
- Increase recovery, rehabilitation and sustained return-to-work outcomes.

WorkplaceNL issued a Request for Proposals in 2022 to contract a third-party provider for the TPI Program. The contract was awarded to Lifemark Health Corp. WorkplaceNL began referring workers to the program on July 25, 2022.

Lifemark recommends and delivers services to workers based on their individual needs. Treatment services for workers are grouped as basic (8-10 weeks), enhanced (10-12 weeks) and intensive (12-14 weeks), and may be extended in consultation with WorkplaceNL. Embedded in these services is access to internet-based Cognitive Behavioral Therapy (iCBT), a focus on sustaining return to work, relapse prevention and after care. An Occupational Therapist stays connected with workers for three to six months after they are discharged from the program. The Occupational Therapist can request additional clinical services, if required.



Evaluation Methodology

A program review was completed for the TPI Program in 2023. The program review focused on the effectiveness of the program delivery model, including processes related to referrals, assessments, communication and reporting.

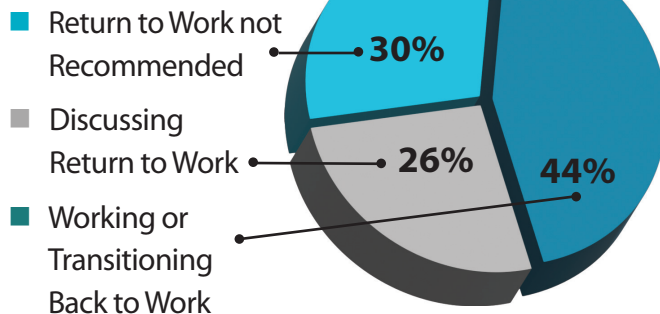


The program review included:

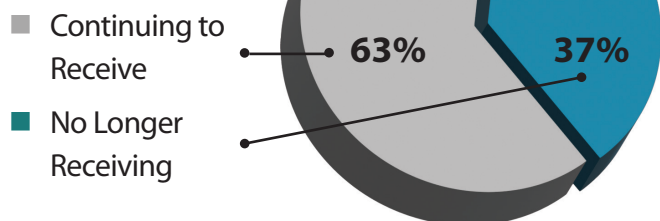
- Analyzing data on program participation and costs, which was collected from July 2022 to September 2023.
- A qualitative assessment by WorkplaceNL's Psychology Consultant, who conducted a preliminary review in February 2023 and subsequently reviewed a sample of 10 claims.

Key Findings

Return-to-Work (RTW)



Wage-Loss Benefits



Data Analysis

While relatively new, the program is being delivered effectively and early outcomes appear positive. As of the end of September 2023:

- WorkplaceNL referred 71 workers to the program.
- Of the 71 workers referred, 63 were recommended for the program.
- Of the 63 workers recommended, 46 completed the program and 17 did not due to extenuating circumstances and recommendations from health care providers.
- Of the 46 workers who completed the program:
 - 20 were working or transitioning back to work, 12 were in return-to-work discussions, and 14 were not recommended to return to work.
 - 17 were no longer in receipt of wage-loss benefits from WorkplaceNL, while the remaining 29 were.

Program Duration

Workers were in the program for an average of 111 days (excluding the transition period after discharge). This includes: a referral process that involves confirmation of the diagnosis, a screening report and referral for treatment (average of 37 days); treatment (average of 62 days); and release of the discharge report (12 days).

The average cost at the time of the evaluation was \$6,800 per worker.



Qualitative Assessment

The Psychology Consultant recommended revising the provider’s reports to reflect standardized testing, progress, treatment goals and interventions for trauma processing. This was completed prior to conducting a detailed qualitative analysis.

The Psychology Consultant identified the following options to modify the program:

- Modify reports further to include more observations and objective findings.
- Create two assessment streams to support managing more complex claims.
- Provide a broader range of treatment options to suit individuals’ circumstances.
- Move to an evidence-based model that includes a mix of therapeutic elements.
- Clarify discussions regarding return-to-work planning and how such discussions are recorded and reported.

Recommendations

1. Continue the program, with changes focused on improved reporting, improved communication and enhanced trauma processing.
2. Establish an outcome-based evaluation plan for the program using WorkplaceNL’s Accountability Framework.
3. Present findings to Lifemark to enhance assessment, treatment and reporting.
4. Implement key findings that can have an immediate impact on recovery outcomes (e.g., stabilization, increase treatment modalities to support trauma processing).
5. Consider creating two assessment streams to support managing complex claims.
6. Review and focus on the return-to-work component of the program by identifying challenges and successes, and how they impact return-to-work outcomes.
7. Encourage case managers to meet quarterly with Lifemark to facilitate effective communication and increased understanding of processes and goals.