



WSIB Claims Management Update

October 2014

Flash NEWSLETTER

Head Injury Claims – Update – October 2014

Many school boards have seen a significant increase in the number of head injuries reported by school staff in the last few years. SBCI continues to lobby the WSIB for better management of head injury claims – both from operational and health care perspectives.

During the past 3 years we have escalated to WSIB management gaps in the handling of head injury claims by front line staff and the problem of limited medical care in many communities. As a result there is often extensive delay in treatment and travel to the Toronto Rehabilitation Institute (TRI) at significant cost to the employer, delayed RTW intervention and support leading to prolonged absence. While there is a Mild Traumatic Brain Injury (MTBI) Program of Care (POC) throughout the province, each WSIB office handles cases differently. The Ottawa office of the WSIB is probably the most advanced on this topic with a well-developed network of local health care providers trained and willing to provide the program of care.

In other parts of the province there does not appear to be adequate knowledge about the management of these cases by front line WSIB staff, no set guidelines or criteria and injured workers are not being referred to POCs. They are often not referred by nurse consultants at the WSIB or by treating physicians. The workers stay off work for weeks and sometimes months without adequate treatment, and only later are sent to the TRI for assessment when they are not recovering on their own. The WSIB is responding to our suggestions and is conducting awareness training with front line staff on the availability of the MTBI POC in offices where use has not been common. They are also trying to ascertain which health care providers are still capable of offering the POC for head injuries as some health care providers have only offered the service very infrequently.

Case Managers have recently been trained on mild traumatic brain injuries – e.g. what expected recovery times should be.

- The training was developed by the WSIB Training Department with input from the Health Services Program Provider Effectiveness Branch.
- Once RTW is being considered these claims are referred directly to Work Transition Services (WTS) where staffs have been trained to deal with head injury claims. They are expected to look at modified work from the cognitive perspective.

Once workers are referred to the TRI, there are situations where there are gaps in the claims handling such as:

- delays in accessing TRI
- lack of information provided to TRI about the employer's offers of work,

- lack of communication with the employer about the assessments and interim recommendations about RTW even though the Case Manager participated in the team case conference and knew the direction that the team was going to take with the recommendations,
- delayed communication with the worker and the family doctor about next steps to be taken with medication changes/active physiotherapy/counseling (all of which had to happen before any discussions could take place on RTW),
- delays or lack of action on the part of TRI or WSIB on the recommendations for several weeks after the final case conference,
- delays in sending WSIB the final reports which then delayed RTW efforts by the CM/ WTS and the employer.
- Communicating to the employer on the worker's participation in treatment and fitness for work.

The WSIB health care services area have committed to meeting with TRI to address the following:

1. Timeline to referral to TRI and reporting back to WSIB
2. Assessment findings and quality of findings
3. RTW – restrictions and barriers
4. Thoroughness of assessments

TRI does cognitive functional assessments – job specific or general, but the WSIB Nurses have to be clear in their referral as to which they want. You can discuss this with the WSIB Case Manager and can also contact the WSIB Nurse Consultant to request an assessment.

The WSIB is interested in working with us to obtain improvements in health care and management of head injury claims but it will take some time for those efforts to result in reduced claim duration and better recovery.

Kelly Melanson of SBCI is working with staff from many of the French language school boards on the preparation of a Head Injury Guidebook which will provide member school board staff with practical resources to better understand and manage these difficult cases. It is hoped that the Head Injury Guidebook will be completed by the end of 2014 with a goal of distributing the information electronically in early 2015. If you have any further questions on the topic of head injuries please contact your SBCI Claims Manager. Thank you