

---

# Partners in Care: Bolstering Patient Care and Return to Work Through a WorkSafeBC/Physician Collaboration

## RESOURCES

---

🕒 1.5 MOC Section 1, Mainpro+

🕒 Monday, February 6, 2023

# TABLE OF CONTENTS

1	Agenda & Speaker Bios	Page 3
2	Presentation Slides	Page 6
3	Health Care Service Provider Contacts	Page 14

# Partners in care

## Bolstering patient care and return to work through a WorkSafeBC and practitioner collaboration

An interactive presentation by WorkSafeBC's medical services and case management services team to discuss a collaborative initiative with B.C.'s physicians and other health care practitioners aiming to improve return-to-work outcomes for their patients.

**Speakers:** Dr. Peter Rothfels, Dr. Alysalm Somani, Lionel Earle, and Tamara Erickson

Time	Description
6:00–6:10 pm	Welcome and introductions
6:10–7:00 pm	<ul style="list-style-type: none"><li>• Worklessness: A medical emergency</li><li>• Snapshot of B.C.'s injured workers</li><li>• Incorporating return to work into a patient's recovery plan</li><li>• Partners in Care</li><li>• Our invitation to you</li></ul>
7:00–7:25 pm	Questions
7:25–7:30 pm	Closing remarks

### Learning objectives

This session is designed to help you:

- Expand your overall understanding of B.C.'s injured worker population and the negative effects of prolonged worklessness on their health and well-being.
- Increase your awareness of the resources and expertise WorkSafeBC's medical advisors can offer to support a patient's timely treatment, recovery, rehabilitation, and medically safe return to work.
- Learn the importance of incorporating safe, durable, and timely return to work as part of treatment plans.

## Your presenters

---

### Dr. Peter Rothfels

Dr. Peter Rothfels graduated from the University of Alberta with a B.Ed. with Distinction in 1976, and as an M.D. in 1981. After spending six years practising emergency medicine in the U.S., he returned to Canada and worked as a physician for 13 years in rural Nova Scotia. In 2000, he moved to Victoria, B.C., where he worked as a locum physician for two years. He then joined WorkSafeBC as a medical advisor, becoming a senior medical advisor in 2006, and then chief medical officer and director of medical services in 2008. A strong proponent of collaboration, he partners with internal and external stakeholders to devise innovative and broad evidence-based strategies to support the needs of B.C.'s injured workers and the medical community. He has extensive expertise in chronic pain and addiction medicine. On both the national and provincial stage, he is a sought-after speaker on the interplay between chronic pain, opioids, and addictions.

---

### Dr. Alysalm Somani

Dr. Aly Somani is a graduate of UBC's Faculty of Medicine. He joined WorkSafeBC in 2017, where he worked first as a medical advisor and then as a manager of Medical Services. He has been the project lead for Partners in Care (also known as the Early Medical Advisor Involvement initiative) since June 2022 — leading a large team of medical advisors in the name of greater collaboration with B.C.'s primary care providers and better support for injured workers. Dr. Somani also works as a family physician at Royal Columbia Hospital in New Westminster and teaches family medicine at UBC. He has worked at GF Strong as a clinical associate in the Spinal Cord Injury Unit, in a chronic pain clinic as a family physician, and has served as a teaching faculty member for the Fraser Health Physician Quality Improvement program. Prior to practising family medicine, Dr. Somani trained as a doctor of chiropractic. In his spare time, he enjoys spending time with his spouse and four children.

---

### Lionel Earle

Lionel Earle is a senior manager in WorkSafeBC's Claims and Rehabilitation Services. He has dedicated his life's work to administering intervention programs for disabled and elderly workers, people in crisis, displaced fishermen, exceptional children and adults, and young offenders. Before joining WorkSafeBC in 1998, he worked as a counsellor in the correctional system, and then in case management and vocational rehabilitation at Newfoundland's workers' compensation board in his native province. He has gained a keen understanding of the role biosocial factors play in a person's recovery and return to life and work. Maintaining an injured worker's connection to the workplace and working in partnership with the medical community underpins his vision for successful return to work. He is a board member at the Langley Care Society and the Langley Lodge — a long-term care facility for seniors.

---

---

## Tamara Erickson

Tamara Erickson began her WorkSafeBC career 18 years ago, initially as a nurse advisor and then as a senior nurse advisor — a role that enabled her to impart training and expertise in various fields of practice to her peers. She has taught everything from how to develop sound return-to-work and recovery plans and proactively assist with a worker’s medical recovery and treatment to how to conduct medical investigations alongside medical advisors and identify an injured worker’s ability to return to employment. Her comprehensive background also includes working as a case manager and, in her most recent role, client services manager in B.C.’s Interior. Prior to joining WorkSafeBC, she worked as a registered nurse for 25-plus years, primarily in emergency and critical care nursing. She is passionate about helping people who have been injured return to life and gainful employment and eliminating needless disability.

---

# Partners in Care

Bolstering patient care and return to work through a WorkSafeBC/medical practitioner collaboration


February 6, 2023

© WorkSafeBC | All rights reserved. **WORKSAFEBC**

1

## How to use Slido

- Open the email reminder you received today, or
- Go to **slido.com**
- Enter **patientcare** in the appropriate field



Technical difficulties?

- Please call Allison at 604.441.4642

2

## Our objectives for this session

Our session is designed to help you:

- Expand your overall understanding of B.C.'s injured worker population and the negative effects of prolonged *worklessness* on their health and well-being.
- Increase your awareness of the resources and expertise our medical advisors can offer to support a patient's timely treatment, recovery, rehabilitation, and medically safe return to work.
- Learn the importance of incorporating safe, durable, and timely return to work as part of treatment plans.

3

## About your presenters

**Dr. Peter Rothfels**

“ We want to support your advocacy role for the best outcome for your patients who sustain a workplace injury or disease.

**Dr. Aly Somani**

“ By working together, we create synergies and empower the workers of B.C. to achieve the best of health, wellness, and function following a workplace injury.

**Lionel Earle**


“ Prolonged detachment from work is a life emergency that can lead to chronic emotional and physical disability.

**Tamara Erickson**

“ Work is therapy. Injured workers can recover while at work, but it takes a collaborative team effort to successfully accomplish this.

4

## Tell us where you're from



Region
Northeast
North Coast & Nechako
Cariboo
Thompson-Okanagan
Kootenays
Vancouver Island/Coast
Lower Mainland/Southwest

5

## Our agenda

1. Welcome and introductions
2. *Worklessness*: A medical emergency
3. Snapshot of B.C.'s injured workers
4. Incorporating return to work into a patient's recovery plan
5. Partners in Care
6. Our invitation to you
7. Questions?

6

### Tell us what you think

Which statement best reflects your own views?

- A. A patient should stay away from work until they've fully recovered from their injury
- B. A patient can recover from their injury at work, when it's safe to do so
- C. Patients shouldn't go back to work until they're pain free
- D. I'm not sure what the best approach is when helping a patient return to work

7

### Work is good medicine

8

“When someone has been away from work for 4 weeks, it's a **medical emergency**.”

— Dr. Gary Franklin, medical director of the Washington State Department of Labor & Industries

**Worklessness: A medical emergency**

9

### Worklessness and unemployment

Worklessness is associated with the following:

**Biological issues**

- Mortality
- Suicide
- Obesity
- Cardiovascular morbidity
- Depression

**Psychosocial issues**

- Substance use
- Accidents
- Poverty
- Alienation
- Intergenerational issues

10

### Worklessness and mortality risk

Medical condition	Relative risk of increased mortality
Diabetes	1.85
Hypertension	1.74
Smoking	1.80
Obesity	1.29
Poverty	1.75
<b>Being unemployed</b>	<b>2.54</b>

Source: Margaretha Voss, PhD, MPH, Lotta Nylen, MPH, Birgitta Floderus, PhD, Finn Diderichsen, MD, PhD, and Paul D. Terry, PhD. *Unemployment and Early Cause-Specific Mortality: A Study Based on the Swedish Twin Registry*, Am J Public Health. 2004 December; 94(12): 2155-2161. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1448606>

11

### Worklessness and self-worth

**Worklessness reduces:**

- Self-respect
- Personal, social, and work-related skills
- Financial status

**Worklessness increases:**

- Stress and tension between family members

12

### Worklessness and treatment providers

- People who are unemployed have higher rates of medical consultations, medication consumption, and hospital admissions
- WorkSafeBC patients require more time with physicians and have more pain and complaints

13

### A snapshot of B.C.'s injured workers

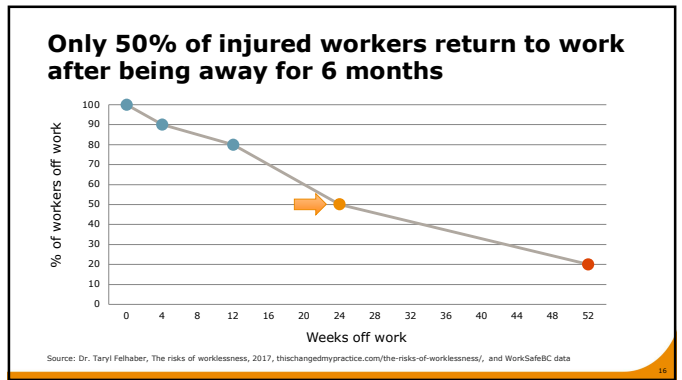
14

### Tell us what you think

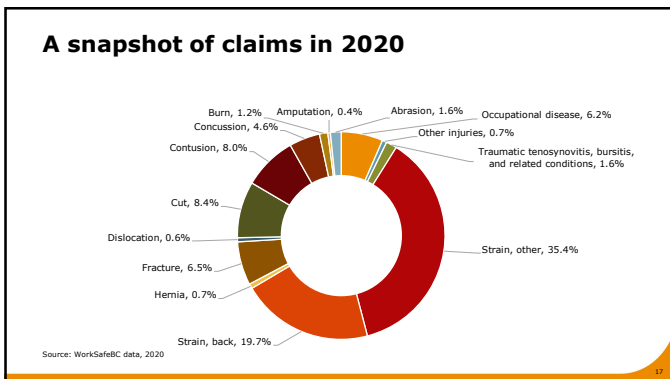
In B.C., approximately what percentage of workers return to employment after being away from work for six months because of an injury?

- A. 80%
- B. 50%
- C. 20%

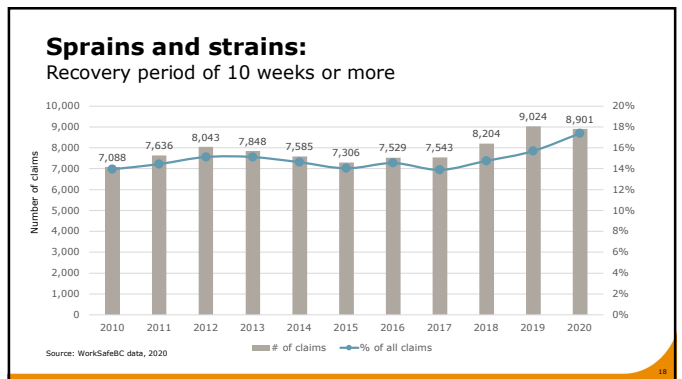
15



16

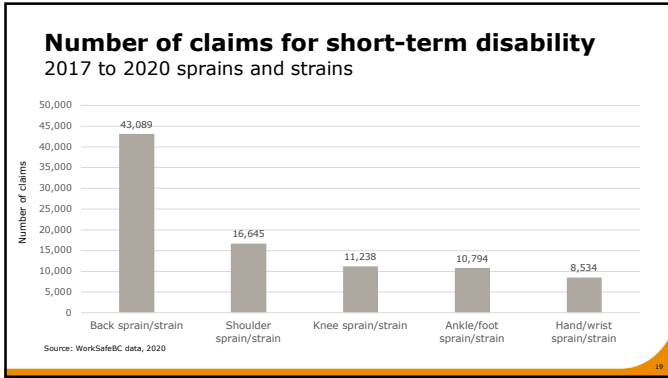


17



18





19

### Tell us what you think

How long would **you** be away from work if you had a shoulder strain?

- A. 14 days or less (2 weeks or less)
- B. 15-29 days (2 to 4 weeks)
- C. 30-59 days (4 to 8 weeks)
- D. 60 days or more (more than 8 weeks)

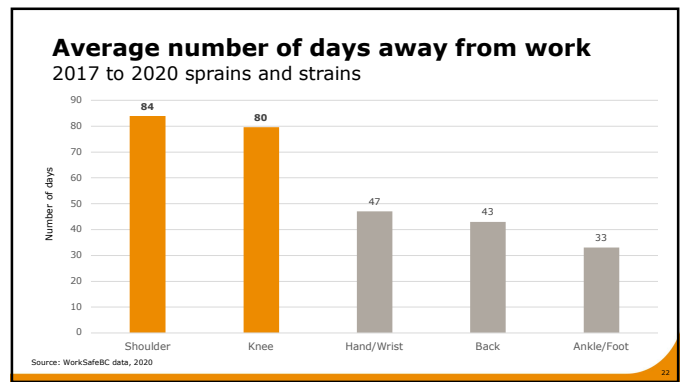
20

### Tell us what you think

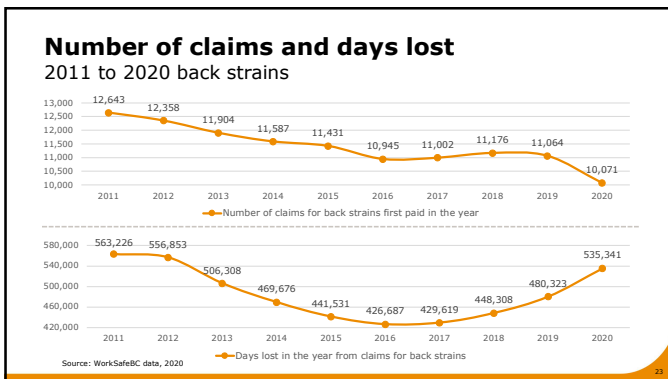
On average, how long do you think **workers** are away from work for a shoulder strain?

- A. 14 days or less (2 weeks or less)
- B. 15-29 days (2 to 4 weeks)
- C. 30-59 days (4 to 8 weeks)
- D. 60 days or more (more than 8 weeks)

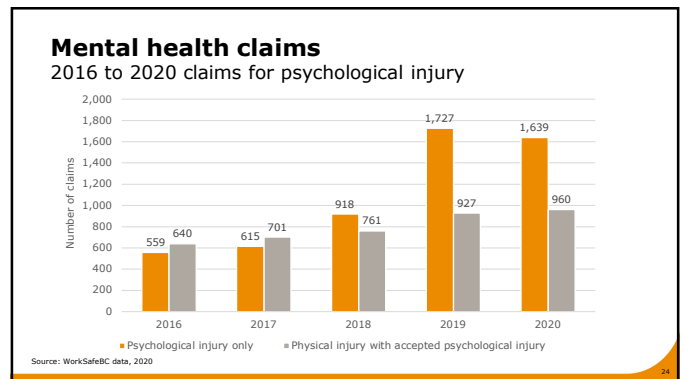
21



22



23



24

### In summary

- Being away from work for long periods is unhealthy
- Average time away from work for common strains and sprains:
  - ✓ Shoulder: 84 days
  - ✓ Knee: 80 days
  - ✓ Hand and wrist: 47 days
- Mental health claims that include a physical injury are on the rise

25

### External factors that affect return to work



26

**Incorporating return to work into a patient's recovery plan**

27

### Work is healthy



28

### Medical association supports return to work

“ The Canadian Medical Association recognizes the importance of a patient returning to all possible functional activities as soon as possible after an injury or illness.

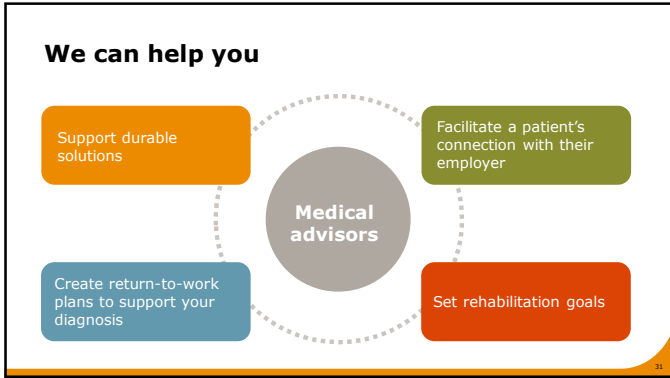
The treating physician's role is to diagnose and treat the illness or injury, to advise and support the patient, to provide and communicate appropriate information to the patient and the employer, and to work closely with other involved health care professionals to facilitate the patient's safe and timely return to the most productive employment possible.

Source: Canadian Medical Association: The treating physician's role in helping patients return to work after an illness or injury (update, 2013)

29

**Partners in Care**

30



31

- ### Opportunities for you
- As a primary care provider, you have a therapeutic relationship with your patients. You're in a prime position to influence your patients' recovery of function and return-to-work outcomes.
  - Discuss expectations re: recovery timelines and return to work on day one.
  - Ask your patient about what they do at work.
  - Tell your patient about the value of returning to work and modified duties.

32

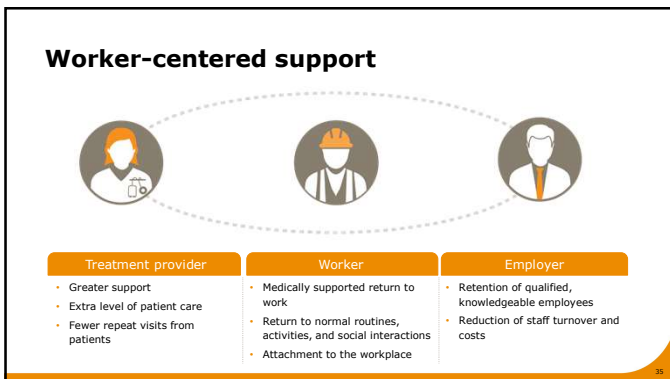
### Tell us what you think

How else can WorkSafeBC help you support injured workers in their recovery, rehabilitation, and return to work?

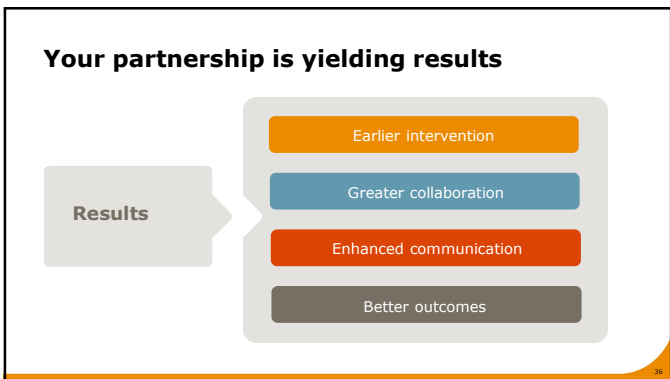
33

- ### Our team of medical advisors
- Have experience as community physicians
  - Maintain clinical practices
  - Often accredited in sports or occupational medicine
  - Often trained in mental health
  - Enlist the help of specialists

34



35



36

### You're making a difference

**Summary of outreach efforts: Jan 2021 to Sept 2022**

- WorkSafeBC medical advisors spoke to the primary care providers of **1,703 injured workers**

**Results from your collaboration**

- **588 of those workers** returned to work two months or less after the call — either to modified duties or to full duties

Source: WorkSafeBC data; return-to-work outcomes are lagged by three months, thus outcomes are as at September 2022 and reported January 2023

37

### What treatment providers are saying

“ I appreciated getting paid for the time spent on the phone call. ”

“ I appreciated the early involvement and support to discuss a proactive plan. ”

“ It's nice to have a voice to talk with now, and a peer to consult with in the future. ”

It was time well spent. ”

“ I didn't know about all these resources that WorkSafeBC offered to our patients (e.g., rehab, support for concussion, tinnitus, and ASTD). ”

38

### Meet Dr. Claire Young, medical advisor

Collaboration is leading to concrete results

- “ Supports durable solutions ”
- Facilitates a worker's connection with their employer ”
- “ Supports return-to-work plans that align with a worker's diagnosis ”
- Supports rehabilitation goals ”

39

### Treating patients as we treat ourselves

- Being off work longer than necessary can lead to needless disability
- Prolonged worklessness is a medical emergency
- Primary care providers typically have different expectations for their patients than they do for themselves

40

**Our invitation to you**

41

### We're here to help

- We thank you in advance for taking our call
  - Calls take 5 to 10 minutes
  - You can bill us for the call
  - You are permitted to share workers' information with us
- Call us through the provincial RACE line
  - 604.696.2131; toll-free 1.877.696.2131
  - Monday to Friday, 8 a.m. to 5 p.m.

42

**Questions?**

Thank you. Please keep in touch.

# We're here to help

We want to make sure you have all the information you need to work with us as a health care service provider. The phone numbers you'll use most often are listed below.

## Procurement Services

**604.276.3344 | Toll free: 1.844.276.3344**  
[purchasing@worksafebc.com](mailto:purchasing@worksafebc.com)

- Becoming a WorkSafeBC service provider

## Health Care Programs

**604.232.7787 | Toll free: 1.866.244.6404**  
[HCSINQU@worksafebc.com](mailto:HCSINQU@worksafebc.com)

- Your contract and fee schedule
- Contracted clinical services

## Payment Services

**604.276.3085 | Toll free: 1.888.422.2228**  
(Monday to Friday, 8 a.m.–4 p.m.)

- A specific invoice or billing rejection
- Invoice correction letters
- General information about our billing process

## RACE Line

**Toll free: 1.877.696.2131**  
(Monday to Friday, 8 a.m.–5 p.m.)

- Physicians and Nurse Practitioners can access timely guidance and advice regarding assessment, management and treatment of patients from a range of specialists

## Claims Call Centre

**604.231.8888 | Toll free: 1.888.967.5377** (Monday to Friday, 8 a.m.–6 p.m.)

For basic information about a claim:

### Claims Call Centre

- Claim status
- Basic claim information
- How to contact the claim owner (the WorkSafeBC staff member who is responsible for the injured worker's claim)

For questions about a specific claim:

### Claim Owner

- Treatment approval
- Discussing an injured worker's condition and progress
- Discussing return-to-work plans and recommendations
- If you don't have the claim owner's contact information, please call our Claims Call Centre

## Common questions

See below for a list of commonly asked questions and the department to contact for help.

Question or topic	Contact
How do I become a contracted service provider?	Procurement Services
I'm new to WorkSafeBC's billing process — how does it work?	Payment Services
I need assistance with an invoice.	Payment Services
I need help with a specific clinical question.	Health Care Programs
I have a question about the status of my patient's claim.	Claims Call Centre
I have a question about my contract.	Health Care Programs

## 2022 WorkSafeBC billing fee codes

Billing fee codes (effective Apr 1, 2021)	Phone call billing code for:
19930	Physician in B.C.
1100490	Physician outside B.C.
1102365	Nurse practitioner
19204	Physiotherapist providing standard or post-surgical treatment block
19177	Physiotherapist providing home, neurological, or vestibular treatment
19132	Chiropractor
1100479	Naturopathic doctor
1252096	Acupuncturist