Measuring the success of our rehab programs

Performance indicators help us promote health care that is accessible, service-driven, cost-effective, evidence-based, and results-focused.

WorkSafeBC rehabilitation programs help injured workers get back to work. How do we know? By looking at the key performance indicators (KPIs) that our Health Care Services department collects, analyzes, and reports.

While KPI data may differ between programs, generally included are:

- Results of injured worker satisfaction surveys.
- Length of time the injured worker was in the program.
- Length of time between the referral date and the service provider's first appointment with the injured worker.
- Percentage of injured workers returned to work after program com-

KPI data is collected, analyzed, and evaluated on an ongoing basis to ensure trends and the effect of contract/service parameter changes on outcomes are identified in a timely manner. Reports are communicated quarterly to all service providers in the relevant program network.

KPIs serve as a quality assurance tool for us and our service providers. The information they provide helps us promote health care that is accessible, service-driven, cost-effective, evidence-based, and results-focused.

How we rate

The table shows some recent KPIs for several WorkSafeBC rehabilitation programs.

Research supports our program strategies

A recent systematic Cochrane Collaboration review of 18 randomized Continued on page 455

Table. Key performance indicators for several rehabilitation programs.

Health care program	Injured worker satisfaction survey score, on a scale of 1 to 10*	Durable return-to-work % [†]
Activity Related Soft Tissue Disorders (ASTD)	8.6	71.70
Occupational Rehabilitation Program 1 (OR1)	8.8	76.65
Occupational Rehabilitation Program 2 (OR2)	8.3	70.21
Hand Therapy	9.2	68.80
Chronic Pain (CP)	7.8	61.19
Medical and Return-to-Work Planning Assessment (MARP)	9.4	37.73

- * "Injured worker satisfaction survey score" is the service provider network's average satisfaction score for discharged injured workers in 2004. Scores higher than 8 out of 10 are considered excellent.
- [†] "Durable return-to-work percentage" is the percent of injured workers not receiving wage loss 1 month post-discharge (includes workers who are off wage loss but receiving vocational rehabilitation benefits) and therefore is used to determine if the worker successfully returned to work and remained at work. The Chronic Pain program is measured 3 months after discharge.

NOTE: Each program serves an injured worker population with specific types of needs that may affect return-to-work outcomes. For example, MARP is an assessment service designed to achieve early diagnostic closure and assist in establishing the appropriate treatment and return-to-work recommendations for workers with outstanding medical issues or barriers to return to work. The Chronic Pain program helps workers with prolonged disability improve their pain management strategies and their employability.

worksafebc

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controlled trials entitled "Work conditioning, work hardening and functional restoration for workers with back and neck pain" by Schonstein and colleagues¹ compared the effectiveness of physical conditioning programs with other management strategies that do not include physical conditioning. The researchers state, "The review of trials found that programs including several features are better than usual care in reducing sick days for some workers with chronic back pain. Those features are: a cognitive-behavioral approach (addressing attitudes and behaviors such as fear of movement), are done at work or in cooperation with employers, and are supervised by a physiotherapist or multidisciplinary team." These findings support the approach and focus of our WorkSafeBC rehabilitation programs.

WorkSafeBC programs are offered by a province-wide network of service providers who must qualify specifically for the program (or programs) they deliver.

To help your injured patients achieve return-to-work success, please refer them to the appropriate WorkSafeBC rehabilitation program.

Contact us

For more information about our programs, visit our Health Care Provider Centre at www.worksafebc.com. For assistance in selecting the appropriate program for your patients, call Health Care Services at 604 232-7787 or toll-free 1 866 244-6404.

> —Don Graham, MD WorkSafeBC Chief Medical Officer

Reference

1. Schonstein E, Kenny DT, Keating J, et al. Work conditioning, work hardening and functional restoration for workers with back and neck pain. Cochrane Collaboration of Systematic Reviews. 2005;3:2.www.mrw.interscience.wiley.com/cochrane/clsysrev/a rticles/CD001822/frame.html.

Wanted: Good guys

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Profiles should be less than 2000 words, and photos are welcomed. Our Guidelines for Authors are available at www.bcma.org, or call 604 638-2815 for a copy or for more information.



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