

# Community Social Services Early Intervention Program (CSSEIP)

Satvinder Basran – CSSEIP Coordinator

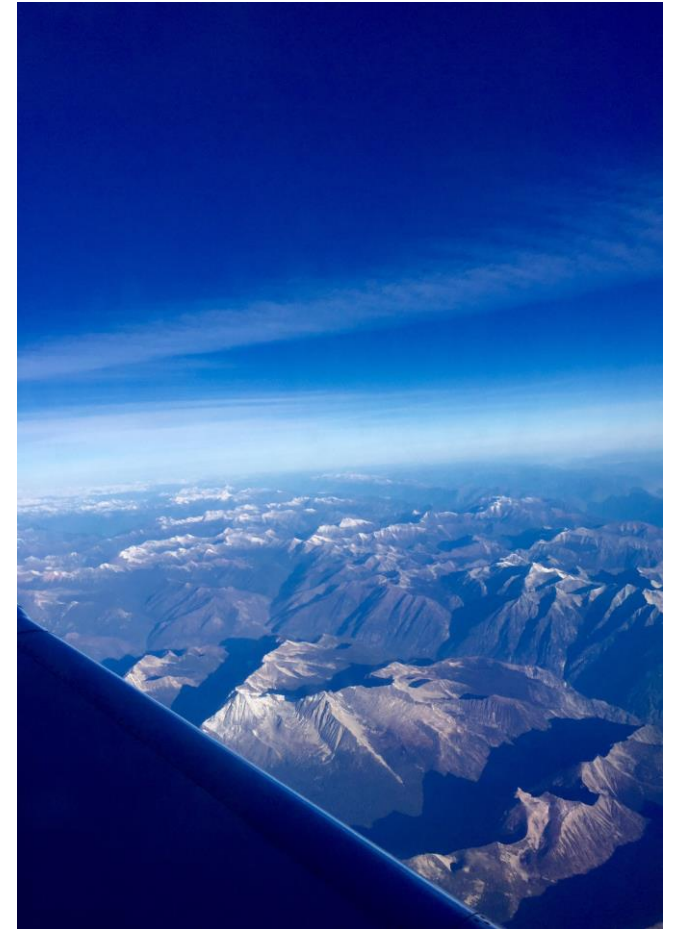


CSSEA Conference 2024



# Presentation Overview

- **CSSEIP**
- **WorkSafeBC - CSSEA Statistics**
- **CSSEA Member Engagement**
- **Top Three: Challenges & Opportunities**
- **Best Practices**
- **Next Steps**



# CSSEIP

## Community Social Services Early Intervention Program

This **joint and collaborative program** is supported by the CSSBA and CSSEA.

The goal of the CSSEIP is to **complement** the Long Term Disability (LTD) plan by **facilitating a pro-active, appropriate, and customized service** for ill/injured employees that assists them to effectively RTW in a caring, safe, and timely manner.

CSSEIP supports employers and their employees by **playing a critical role in reducing** the human and financial costs of sick leave, injuries and disability claims within the CSSEA members.

# CSSEIP Objectives

- to **initiate early contact** with the ill/injured;
- to **identify and provide** appropriate, caring case management of the ill/injured employee's health issues;
- to **convey the message** that employees are valued;
- to **facilitate** the rehabilitation of ill/injured employees while expediting a safe and timely RTW through an RTW plan;
- to **encourage** health promotion and employee wellness;
- to be **compliant** with legislation and regulations (e.g. *Workers' Compensation Act*, Human Rights legislation, including duty to accommodate, provincial privacy laws, collective agreements);
- to **promote open discussion and support** for the CSSEIP by the CSSBA and CSSEA; and
- to **manage the ongoing costs** of benefit plans, in particular sick leave, WorkSafeBC and LTD.

# CSSEIP

CSSEIP is activated after a 5 (full time) or 8 (part time) day absenteeism (worker is ill or injured).

**EIP participation is mandatory** for regular full & part time employees, and employees filling temporary vacancies under Article 24.11 that meet the 3 month health and welfare benefits eligibility requirement.

1. Employer refers Sick or Injured Employee
2. Disability Management Provider Contact Employee (48hrs)
3. Employee Receives Assistance & Return To Work
4. If the matter is much more serious it will proceed to the Long Term Disability processes.

This is applicable to both employees in an *occupational and non-occupational* situation.

---

(CSSEIP Process Flow Chart – Policy & Procedures)

CSSEIP

## Injury in the workplace

- WorkSafeBC

## Benefit Providers

- Community Services Benefits Trust - Disability Management Institute Inc. (DMI),
- Healthcare Benefits Trust - Canada Life, &
- Schmunk Gatt & Smith - Acclaim Ability Management Inc.

# CSSEIP Statistics

## CSSEIP Reporting Summary

Period of January 1 to September 30, 2024

❖ Total Number of Non-Participation <b>Letters</b> Received*	288
❖ Total Number Non-Participation <b>Employees</b> Received	213
❖ Total Number of <b>CSSEA Members</b>	80

\* This includes all letters from Acclaim, DMI & Canada Life  
(Data captured October 3, 2024)

WorkSafeBC

CSSEA

Statistics

## WorkSafeBC - CSSEA

### Executive Summary Report

#### Injury Claims Types / Claims Summary

(2021–2023)

(WorkSafeBC Classification Units: 766007, 766010, 766017 & Remainder)



Statistics

WorkSafeBC

## Overview

The **purpose of these slides is to provide a profile** of the types of injuries, cost of injuries, time loss as a result of injuries and the return to work status of CSSEA members.

The **aggregate data is based on WorkSafeBC's actuarial process** which uses statistical models to analyze data and assess risk over a period of time.

The Community Social Services sector is registered in three primary classification units (CU) with WorkSafeBC:

- Counselling or Social Services (CU 766007)
- Job Skills and Life Skills(CU 766010)
- Residential Social Services Facility(CU 766017)

The following slides will also capture a **Remainder section** where members are also registered in other classification units. These classification units have not been identified but rather is a catchment of others CUs.

Statistics

WorkSafeBC

## CSSEA Executive Summary Report

### Injury Claims Types / Claims Summary Chart (2021–2023)

(WorkSafeBC Classification Units: 766007, 766010, 766017 & Remainder)

Accident Types of Claims	Claims Count	Percentage %
Acts of Violence or Force	988	41%
Overexertion	721	30%
Exposure to Toxic Substance	695	29%

**Total Claims Count: 2,404**

Note: Percentages are reflective of the total amount of claims and costs associated with the types of injuries among CSSEA members (2021-2023).

(Remainder CU: FIPPA Section 22 notated - CSSEA members)

# CSSEA Executive Summary Report

## Injury Claims Types / Cost Summary Chart (2021–2023)

(WorkSafeBC Classification Units: 766007, 766010, 766017 & Remainder)

Accident Types Costs	Claims Amount	Percentage %
Acts of Violence or Force	\$14.8M	36.2%
Overexertion	\$13.7M	33.5%
Fall On Same Level	\$12.4M	30.3%

**Total Claims Cost: \$41M**

Note: Percentages are reflective of the total amount of claims and costs associated with the types of injuries among CSSEA members (2021-2023).

(Remainder CU: FIPPA Section 22 notated - CSSEA members)

Statistics

WorkSafeBC

Statistics

WorkSafeBC

## CSSEA Work Loss Days Summary Chart (2021–2023)

(WorkSafeBC Classification Units: 766007, 766010, 766017 & Remainder)

CSSEA Total Work Loss Days	2021	2022	2023	Total
Counselling or Social Services #766007	10,786	15,807	15,420	42,013
Job & Life Skills #766010	4,054	3,915	2,819	10,788
Residential Social Service #766017	29,631	27,378	30,544	87,553
Remainder CUs	6,728	5,532	6,124	18,384
<b>TOTALS</b>	<b>51,199</b>	<b>52,632</b>	<b>54,907</b>	<b>158,738</b>

**Total Work Loss Days: 158,738**      Trend - Time loss increasing over 2021-2023 period.

**610.5 FTE's\* (203.5 yearly)** Employees on leave as a result of an injury in the work place.

**\*(Full Time Equivalency Based on a 37.5hr work week at 52 weeks = 1950hrs/year)**

Note: This data does not include employee leaves that are of a illness or long term disability nature (occupational and or non-occupational).

(Remainder CUs: FIPPA - Section 22 notated - CSSEA members)

Source: WCB Special FOI Request

Date: March 2024



Statistics

WorkSafeBC

## CSSEA Return To Work Summary Chart (2021–2023)

(WorkSafeBC Classification Units: 766007, 766010, 766017 & Remainder)

Summary Percent of Claims Returning to Work (%RTW) 2021-2023				
CU	Year	≤ 4 weeks (%)	≤ 26 weeks (%)	26+ weeks (%)
766007	2021-2023	56%	82%	6%
766010	2021-2023	56%	87%	3%
766017	2021-2023	56%	85%	6%
Remainder	2021-2023	57%	85%	5%
<b>Average</b>		<b>56%</b>	<b>85%</b>	<b>5%</b>

Of the 2404 claims in this period on average:

- 56% of claims are successful in returning back to work with in a 4 week period
- 85% in less than 26 week period
- 5% in 26+ week period

10% Claims variable – pending or suspended

Source: WCB Special FOI Request

Date: March 2024

## Community Social Services Sector & Healthcare 2022 – 2025 Classification Units - Base Rate Chart

CU #	Classification Unit (CU)	2022	2023	2024	2025*	Change*
766001	Acute Care	\$2.36	\$2.75	\$2.92	\$2.66	10%
766002	Alcohol or Drug Treatment Center	\$1.67	\$2.00	\$2.40	\$2.59	20%
766006	Community Health Support Services	\$2.40	\$2.89	\$3.47	\$4.13	20%
766011	Long Term Care	\$3.93	\$4.43	\$4.54	\$4.42	3%
766007	Counselling or Social Services	\$1.71	\$2.05	\$2.47	\$2.62	20%
766010	Life and Job Skills Training	\$1.51	\$1.81	\$2.02	\$1.85	8%
766017	Residential Social Service Facility	\$3.29	\$3.95	\$4.75	\$5.70	20%

Industry classification unit base rates listed are the average premiums assigned by WorkSafeBC. Based on the employers' performance individual rates could be lower and or greater than the posted classification unit average base rate.

(\* Proposed for 2025 and **increase** or **decrease** 2024 to 2025 percentages)

Source: [WorkSafeBC Tableau Resource](#)

Data: September 2024



Statistics

WorkSafeBC



CSSEA

Member

Engagement



# Member Engagement

# Feedback Survey & Interviews

This section of the presentation **focuses on gathering input and feedback from CSSEA Members**. We express our gratitude to all the organizations that participated and responded to the EIP Survey.

- AiMHi – Prince George Association for Community Living,
- Arcus Community Resources,
- Aspire Richmond,
- Axis Family Resources Ltd.,
- Bethesda Christian Association,
- Disability Development Association,
- Milieu Family Services,
- Nanaimo Association for Community Living,
- posAbilities Association of British Columbia,
- Starbright Children’s Development Center,
- Vancouver Aboriginal Children and Family Services Society, &
- Western Human Resources Corp.

---

CSSEA Member Engagement (January to September 2024)



Member  
Engagement

Feedback  
Survey &  
Interviews

## Feedback

- *Employees reluctant to provide personal information to 3<sup>rd</sup> Party;*
- *Mental Health Claims a serious concern and difficult to manage;*
- *Finding Return To Work plans sometimes are too long;*
- *Unions have been very supportive in the EIP process;*
- *Medical system over burdened is too slow to support staff;*
  - *Much more difficult in rural & remote areas*
- *More success with **Physiotherapists** than General Doctors;*
- ***Backfilling** positions regarding injured or ill workers on leaves poses problems;*
- *Concern regarding employee receiving **benefits over the age of 65**, there is no support by third party benefit providers both on LTD and sickness;*

Member  
Engagement

Feedback  
Survey &  
Interviews

## Feedback

- *WorkSafeBC & Benefit Provider (in some cases) **not maintaining claims** or files consistently;*
- ***WorkSafeBC** also allows benefits for **employees over the age of 65** if they are injured in the workplace.;*
- ***Constantly working on communication** with employee, supervisors, managers, directors on health & safety and EIP;*
- *Employer **notice leaves** tend to happen more so when employee **disciplinary action** is applied;*
- ***Aging Workforce**;*
  - *Poses recruitment & retention challenges*
  - *Injured or ill workers naturally take longer to recover*
- *Challenges with **Benefit Provider** – following up on a **timely manner**.*

Member  
Engagement

Feedback  
Survey &  
Interviews

## **Suggestions for CSSEIP Coordinator**

- **Work closely with 3<sup>rd</sup> Party Benefit Providers to support employers** – help us navigate through process when RTW is complex.
- **EIP to focus and finds ways to strengthen supports for employers & employees.**
- **Help define responsibilities and roles** – how employer and third provider work together to support policy and process.
- **Generically examine costs** with respect to disability management – LTD, WorkSafeBC, & other leaves.
- **Develop Best Practices: Templates & Resources** – Trainings, Education & Health & Safety because it is a part of being proactive on injuries in the workplace.
- **CSSEIP to send Survey to employers periodically** to gather information on challenges and suggestion to improve the process - workers Ill or injured (occupational and non-occupational)

Member  
Engagement

Feedback  
Survey &  
Interviews

## Top Three Challenges Identified

### **Policy – Disability Management & Return To Work**

- Agency EIP and Disability Management Policy
- Defining Roles & Responsibilities
  - Employee, Union & Benefit Provider

### **Communication**

- Process and information lost in translation with employee, WorkSafeBC, Benefit Provider & union
- Time delays in the early intervention process – how do we keep on top of it.
- Not clear who is driving the bus...

### **Lack of EIP Resources & Training**

Member  
Engagement

Feedback  
Survey &  
Interviews

## Top Three Opportunities

### **Development of a Robust agency EIP and Disability Management Policy**

- In Policy clearly define roles & responsibilities
- Engage employees, union, WorkSafeBC & benefit provider
- Prescribe reasonable timelines

### **Communication (try to control what you can)**

- Employer – point person
- Clarify - Employee, WorkSafeBC, Benefit Provider & Union
- Medical System

### **EIP Resources & Training Development**

- More resources, templates, education identified needed for CSSEA Members.

# Best Practices





# Best Practices

**Agency Policy:** It is the **organizations policy & procedures** that will ensure alignment is in places and all parties responsibilities regards Disability Management & Return To Work is a success. **Share** *Disability Management & Return To Work Policy* with Third Party Benefit Provider.

**Communication Plan:** Communication is **not just limited** between the worker and the employer, this also includes the agency's third party benefit provider and WorkSafeBC. The **plan should detail** how often the workplace will be in touch with the employee, who will reach out, and the method of communication.

**Worker Centered Approach:** From a worker lens by engaging in an active **risk assessment process** and canvassing the type of work and occupation performed – an employer can provide develop strategies on how to integrate workers back into the workplace. (Job Jar – light duties...)

**Labour Relations:** Ensure joint engagement (employer/union) on disability management.

# Best Practices

**Staff Orientation:** Ensure when **on boarding employee and revisiting policy** on an annual basis that employees are aware of the organization DM & RTW.

**Light Duties:** **Light duties** and other occupational related duties should be developed prior to a possible injury or illness of a worker. This will allow the organization to the ability to take a proactive approach.

**Joint Occupational Health & Safety Committee:** JOSH Committees are encouraged to provide support, insight and feedback to the disability management and return to work process.

**Benefit Provider & Unions:** Reach out to your benefit provider & union – they may have **excellent resources and in house training** that you may be able to access.



# Next Steps

## CSSEIP Coordinator Member Support

- **Advice** on the development, updating, and application of **Disability Management & Return To Work Agency Policies and Procedures**;
- **Understanding** EIP absence trends at your Agency;
- **Assisting** in **communications with union representatives** to support employees to **engage** in the EIP where they are **not properly participating**;
- **Assisting** in communications with the benefit provider to address issues arising in the intake, case management, and the return to work (RTW) processes;
- **Assisting** with **developing a RTW plan** for an employee – with or without accommodations (complex matter);
- **Advice** on the **transitioning of employees** from the EIP to LTD Plan should a return to work not be available.

# Next Steps

- **Build partnerships** with Party Benefit Providers and WorkSafeBC to support CSSEA employers & staff.
- **Develop Best Practices:** Templates & Resources (Depository)
- Collect **CSSEA members aggregate data** in the area of WorkSafeBC & Disability Management.
- To **develop a CSSEIP disability management database** that will identify the disability management status and trends.
- Work **collaboratively** with CSSEIP Coordinator (CSSBA) – when hired
- **Continue to provide support to CSSEA members** on disability management and return to work.

# Resources

## CSSEA Membership Website Updates

### WorkSafeBC

- [Overview of Bill 41](#)
- [Employers Return-To-Work Information Link](#)
- [Injury Management & Work Disability Management Resource Link](#)

### Others

- [NIDMAR Link](#)
- [CSS Health & Safety Handbook Link \(Pg. 32-38\)](#)
- [Canada Government D.M. Fundamentals Link](#)
- [CSSEA & CSSBA Joint Job Evaluation Project](#)
- [Employer Advisors](#)
- [CSSHSA Resources](#)

# Thank You!



***Satvinder Basran***

**Coordinator,**

**Community Social Services Early Intervention Program**

Community Social Services Employers' Association

800 – 555 Burrard Street, Box 232 | Vancouver, BC | V7X 1M8

Direct Line: 604.601.3127 | Toll-free: 1.800.377.3340 Ext. 127

Fax: 604.687.7266 | [sbasran@cssea.bc.ca](mailto:sbasran@cssea.bc.ca)