



Haro Park and Partners Benefit from Disability Management



A one-time grant from the Government of British Columbia to undertake a number of disability management audits has paid major dividends for eight independent long-term care facilities in Metro Vancouver.

The Disability Management Excellence initiative was launched by the BC Employment and Income Assistance Ministry in July 2008. Under the initiative, the province provided \$1 million to NIDMAR to sponsor Return to Work / Disability Management program audits across a broad range of public and private sector; and small, medium and large employers; and following the audit, employers would be eligible for up to \$10,000 in funding to implement better practices for RTW / DM programs.

In Vancouver, Haro Park Centre was one of 16 care facilities that took advantage of the program. Executive Director Catherine Kohm said the audit, performed by Mike Carr, CDMP, of Ultima Medical Services, was an eye-opener.

“We did an audit in the fall of 2008, when money became available through the Healthcare Benefit Trust (HBT), which together with the BC Government and WorkSafeBC, was one of the program sponsors,” Kohm said. “HBT put out a call to long-term care facilities asking if anyone was interested in doing an audit for free.”

Under the DM Excellence initiative, Carr performed the audits in the long-term care / community care sector and what he found was disturbing.

“The results were consistent. Nobody had a policy; nobody had a framework to work from; not one facility had a DM program to say what they were going to do if someone became disabled, either at work or at home,” he said.

“We had nothing,” Kohm said. “It would pop up on somebody’s desk that someone was injured, and we’d kind of remember it two weeks later.” As a result of the audit, Kohm and her colleagues realized that there was a glaring need to create a DM program for Haro Park.

The campus of care serves 224 residents. Thirty-four are in independent living, 30 in assisted living and the remaining 154 are in long-term care. The facility has a working population of 178 permanent staff (some part-time) and about 80 casual staff. They include registered nurses, licensed practical nurses and care aides, plus dietary staff, recreation therapy workers, as well as building services and maintenance staff. “The greater part of injuries is in care, followed by dietary,” Kohm said.

Like most care facilities, the working population at Haro Park is aging, with an average age around 45, with 10 years on the job. Those older workers are more prone to injury, and the clients are older, sicker and more prone to dementia than in previous times.



“The people who come to live with us are generally staying at home longer, which is great, but it means that, by the time they come to us, they need a lot of care.”

Following the audit, Kohm applied for Stage 2 funding to develop a DM manual. “Then we identified we needed someone to coordinate the process. The Health Employers Association of BC (HEABC) helped us submit a proposal to WorkSafeBC, which put in half the cost for a DM professional for two years.” A consortium of eight care homes agreed to share the other half of the costs and the services of one Certified Disability Management Professional (CDMP), and HEABC provided office space and support materials. “The project has just completed and we are reviewing the final report.”

Partly as a result of the DM Excellence initiative, DM has now become part of a new collective agreement between the industry unions and the employer. For independent care homes however, finding the funding for a RTW Coordinator is a challenge, and the province has created a committee to investigate how small facilities can implement the new collective agreement DM requirements.

Kohm said that Haro Park and the seven partner facilities are in discussions on how they might share one RTW Coordinator, using the model developed during the two-year trial period. That could involve hiring an outside service provider, but one Haro Park employee is taking steps to deliver the service in-house.

Kohm explained that this colleague, who is currently the manager of the dietary department, became so interested in the RTW field that she enrolled in some educational modules. The other partners have already inquired about sharing her services.

When her certification is complete, Kohm said it might prove feasible to divest some of her current management responsibilities at Haro Park and designate her as overall RTW Coordinator for the partner facilities as part of a larger sharing of resources and expertise.

“I think it opens up all kinds of possibilities. Four years into DM, we as an organization have a fairly good handle on where we should be going. We have a manual, we have somebody who is interested, we are very committed, and we know how much it will help the workforce.” Kohm said that with an aging workforce in a stressed environment, it has become critical to seek every avenue to assist injured employees back into the workplace.

“There is a recognition that DM is both a good thing and the right thing.” The eight partners have also discovered that a working DM program is good for the bottom line. At Vancouver Coastal Health Authority, vice-president for employee engagement, Anne Harvey reported that her organization saved \$3 million in direct costs the first year after their audit. Kohm said the care facilities have also benefited financially. “As a group, when we looked at our return on investment, we were about five-fold. As a group of employers, we saved a substantial amount of money.”