

# Ontario Round Table Return to Function, Return to Work


*Moving To Health and Productivity*

*Presented by: **Dr. Lisa Doupe** MD DIH DOHS*

Leader Round Table Project


Presentation to New Brunswick Workplace Safety Health and  
Compensation Commission

Saturday, April 5, 2003



“.....The pace of change varies with the degree to which the prevailing system of beliefs has found expression in the structure and practices of ..... organizations whose participants’ interests are threatened by change.”

Evans, Barer, and Marmor, 1994

- 
- Three key points re RTW system
  - History of the Round Table
  - Future of Direction of Round Table

# Three Key Points

- Present system is dysfunctional
- 15 Ontario sectors work together
- New knowledge to create coherent seamless system

# Sectors

- Persons with disabilities
- Families of persons with disabilities
- Academia/research
- Aboriginal
- Citizens/taxpayers
- Consumer
- Politicians
- Employers
- Government - Federal
- Government - Provincial
- Health care providers
- Insurers
- Labour
- Legal
- Voluntary sector

# First Key Point

## ➤ Current System

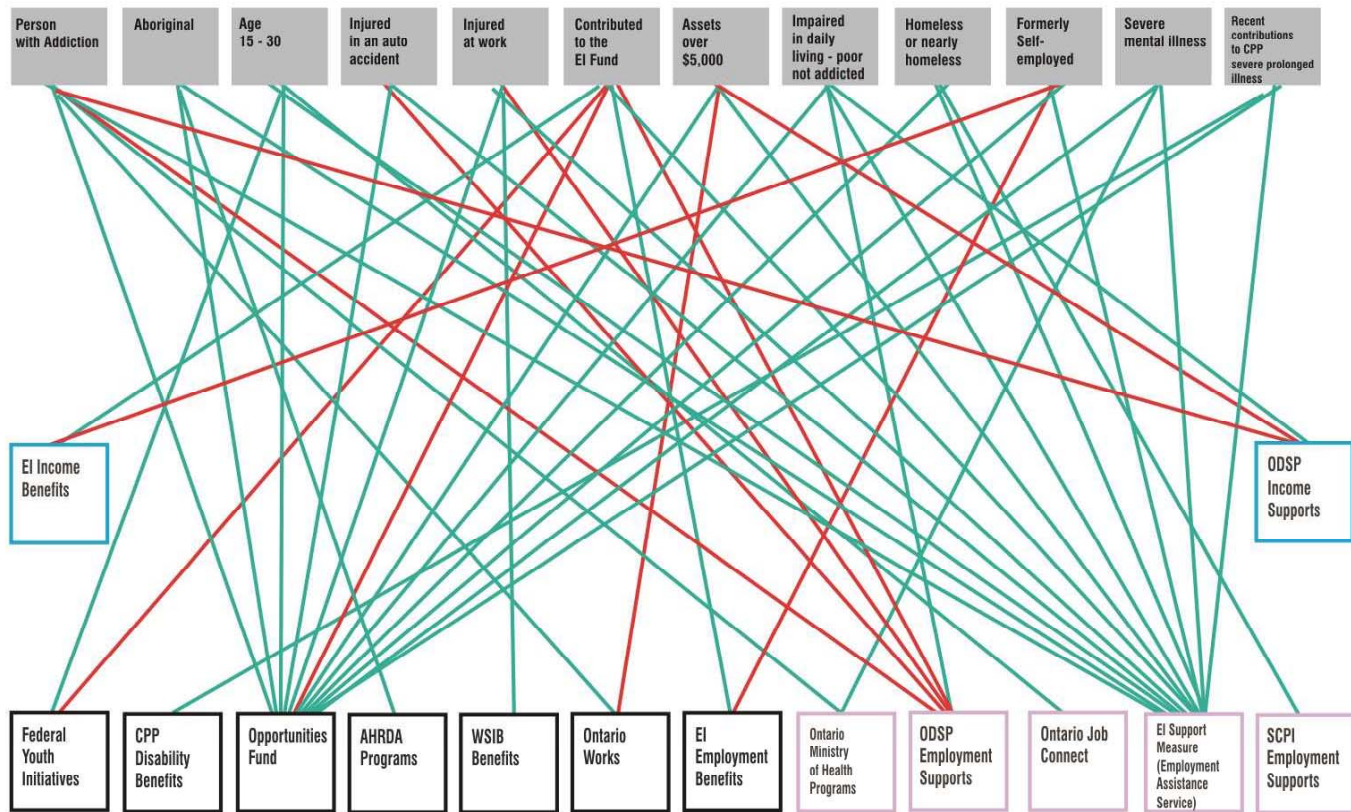
- Gaps in communication
- Gaps in coordination of supports
- Overlaps
- Sectors have not worked together
- Lack of common definitions
- Lack of human resource planning
- Lack of recognition of professionals'
- Lack of team training

# First Key Point *cont'd*

- No common agreement and recognition of roles and responsibilities
- Assessments not accepted by other authorities
- Lack of coordination across sectors
- Lack of follow up of PWDs
- Poor feedback loops within the system.
- Significant delays

# First Key Point *Cont'd*

## Chaos



\*CLIENTS MAY BE ELIGIBLE FOR ONE OR MORE PROGRAMS

— Excluded from Program — Eligible □ May include both Income and Employment Supports

# Second Key Point

## ➤ Support for Collaboration

- **1997** -- The Canadian Medical Association policy *“It is intended as a first step in the development of a Canadian approach to the return to work process – one that involves physicians, workers, employers and the public in an equitable, effective system that preserves the autonomy of the patient-physician relationship while contributing to the economic productivity of the country.”*

Dr. Judith Kazimirski, *CMAJ*, March 1, 1997

- **1998** -- *Furthermore, the evidence now accumulating suggests strongly that piecemeal approaches, based at only one stakeholder site or addressing only one phase of disability and targeted to only one of the underlying factors, will not work well.*

John Frank, *CMAJ*, June 16, 1998

## Second Key Point *cont'd*

- Stakeholders willing
- Objectives of Round Table:
  - Feedback loop to the process
  - Leapfrog projects
  - Transfer knowledge
  - Facilitate relationships

# Third Key Point

## ➤ New Knowledge

- Systems theory
- Evidence based model
- Paradigm shift – disability to ability
- Individual functioning and health drives economic productivity

# Ideal System

- Coherent
- Common assessments
- Common forms.
- Immediate access to appropriate intervention by the appropriate professional
- Timely decisions by health, employment support and income providers
- Roles of all stakeholders are clear
- Less costly – sustainable
- People with disabilities – The path back to work for PWDs is clear; supports are timely and effective.

# History of Round Table Project

## ➤ Round Table I

1998 – 8 sectors

- Priorities identified vision, language, model for safe and timely RTF/RTW

*"This work forms a solid basis to move ahead with the development of a coordinated approach with the potential for significant cost savings and a more productive workforce"*

Chief Financial Officer, Ontario Medical Foundation

# History of Round Table Project

## *Cont'd*

### ➤ Round Table II

- 1999 -- 11 sectors
- Common Vision
- *“To improve the systems that help people with illness, injury, or disability from any cause, develop and secure their social and economic self sufficiency and to help stakeholders in the field identify and overcome barriers together.”* Round Table stakeholders (28 organizations)

### ➤ Priorities

1. development of an integrated service delivery model
2. common language
3. policy/legislation

# History of Round Table Project

*Cont'd*

- Round Table III – First Objective:
  - Environmental Scan
    - Emergence of a systems approach to solving community problems,
    - Alignment of visions and values that are inclusive of all Canadians,
    - Paradigm shift from disability and mortality to ability and life,
    - Redefinition of the role of medicine in RTF/RTW by the medical community to include work,
    - Emergence of evidence-based models in RTF/RTW, and
    - Growing evidence that people's health drives economic productivity

# History of Round Table Project

*Cont'd*

- Round Table III –Second Objective:
  - Integrated service delivery model
  - Components should be
    - ◆ System alignment
    - ◆ Horizontal management and
    - ◆ Meeting individual needs

# History of Round Table Project

*Cont'd*

## ➤ Round Table III –Third Objective:

- Engagement of stakeholders in projects
- Forum, February 13 and 14, 2003
  - Strategic directions
  - Strengthen Round Table's approach
  - Pilot projects e.g. map the current system

# Successful Multi-stakeholder Initiative


- Name of group is Physician Education on Work and Health
- Mission
  - To improve Ontario's medical education related to work and health and to better match the knowledge, skills and behaviour of physicians with the needs of patients in the evolving workplace.
- Result: undergraduate education in work & health in five Ontario medical schools

# Next Steps for Round Table

- Strengthen strategic directions
- Next Forum: September 2003
  - Discussion of integrated service delivery model for Ontario

# Conclusion

- System is dysfunctional
- Stakeholder groups in Ontario learning to work together
- Clear vision, supported by knowledge and stakeholder energy



If a factory is torn down but the rationality which produced it is left standing, then that rationality will simply produce another factory.”

*Robert Pirsig, Zen & the Art of Motorcycle Maintenance*



---

# Next Steps

---

- ◆ How does Ontario work together with New Brunswick?