

November 16, 2021

Dr. L. Greenberg, Ph.D.
Chairperson
Workers' Compensation Act Committee of Review

Dear Dr. Greenberg,
Thank you for your October 5, 2021, invitation to the Psychological Association of Psychologists (PAS) to comment on the WCB Act and regulations. The PAS executive passed on the invitation to the Saskatchewan Coalition of Rehabilitation Psychologists (SCRCP) given that the SCRCP formed because of our commitment to providing quality psychological service to injured workers in Saskatchewan. Thus, we are eager to take this opportunity to share a few pertinent concerns with you regarding the psychological services provided within the WCB system.

Our response was generated after consultation with the members of SCRCP, who represent more than 80% of the psychologists doing this work in the province. These psychologists provide assessment and treatment services to injured workers either individually, in a primary care setting, or through multidisciplinary clinics where the psychologist provides service as part of a team.

The psychologists who comprise the membership of the SCRCP have raised and expressed numerous concerns to the WCB over the years. These concerns relate to the quality and quantity of service delivery. There is significant history and nuance to these concerns, but in the interest of brevity, we will provide only a short summary of our most pertinent challenges with the current WCB system. We hope for the opportunity to discuss more fully these and other issues in a more interactive forum. In brief, our primary concerns include the following broad issues:

1. Poor communication between the rehabilitation psychologists and the WCB. This can, and has, occurred at multiple levels. For example, between psychologists and WCB case managers or facilitators, WCB Psychological Consultants, clinic managers, and the Coalition of Physical Rehabilitation Centres of Saskatchewan (CPRCS). Issues of communication have proven complicated to resolve, despite preliminary efforts from multiple stakeholders. Questions and feedback submitted from psychologists is often ignored, and our input has even been discouraged. This pattern of behaviour has resulted in challenges in service delivery as well as a perceived sense that our professional contributions are neither wanted nor respected by the WCB.
2. Rehabilitation psychologists have provided numerous examples of times in which our professional expertise (in the form of opinions, conclusions, diagnoses, and treatment plans) has been contested or dismissed by the WCB. There have been instances when psychologists have been asked to engage in practices that are contrary to the professional and ethical standards to which we must adhere. Our members have offered examples of the insurer attempting to inappropriately direct clinical care, insisting upon unvalidated and non-scientifically sound methods claiming exemption from professional standards such as HIPA legislation, and/or changing processes without adequate consultation with direct treatment providers. These experiences have contributed to the perceived lack of respect for psychologists' opinions noted

above, and have at times, resulted in negative clinical processes and outcomes for injured workers.

3. Rehabilitation psychologists are often tasked with treating serious and complex mental health conditions, in a field where there may not always be universally agreed upon standards for “objective evidence” of function and impairment. The workers referred for such treatment require timely and competent care by highly trained psychologists, which unfortunately, they are not always provided due to current gaps in the system. The current shortages in treatment providers and availability (and treatment delays) are in part, the result of poor communication and disrespectful treatment from WCB. Some of our members now decline to work with the insurer or greatly limit their availability.

It is our belief that healthcare disciplines whose services are sought/required by the WCB should be consulted on matters of practice and service delivery. We appreciate the opportunity to highlight these general concerns and hope that you will take them under consideration. We would welcome a meeting with the WCB to discuss our concerns in greater depth and collaborate on meaningful solutions to improve the psychological services that injured workers receive in our province.

Sincerely,



Glenn Pancyr, Ph.D., R.D. Psych
Executive Chair of the SCRP

On behalf of the Saskatchewan Coalition of Rehabilitation Psychologists