



Information Communiqués should be circulated amongst all DAC Clinical and Administrative staff. They are intended to keep DAC staff informed on current issues and to provide information on the activities of the Minister's Committee on the Designated Assessment Centre System (DAC Committee).

This issue provides information regarding: the DAC Self-Audit; General Guideline 7: DAC Timelines, the DAC Report Format, Style and Content Guide, Catastrophic Impairment costs; the types of assessments conducted at the Bloorview MacMillan DAC; modified OCF-14s; the DAC Site Physical Checklist; recent arbitration decisions; and questions raised on the DAC Hotline.

Quality Assurance: The DAC Self-Audit

The DAC Committee completed its work on the assessment guidelines in 2001.

Since that time, the DAC Committee has been studying quality assurance and quality improvement mechanisms to evaluate compliance with these assessment guidelines and to study the best practices within the DAC system.

The cornerstone of this quality assurance program will be the DAC self audit. While the self audit is still under development, the DAC Committee plans to have a number of components within the self audit that will allow a DAC to self-assess their understanding of

the Statutory Accident Benefits Schedule (SABS) and the DAC assessment guidelines.

The main components of the self audit may include: a DAC activity report that will allow a DAC to compare their assessment timelines and costs against system averages; a questionnaire that will allow DACs to identify areas of the SABS and assessment guidelines that require some remedial education, and a process for the DAC to compare their final reports against the DAC Committee's expectations of best practices.

The development of the self audit will continue this fall with a plan to conduct a pilot of the program this month. It is planned that the self audit process will begin with medical/ rehabilitation DACs in the Spring of 2003.

General Guideline 7: DAC Timelines

The DAC Committee is pleased to introduce and distribute General Guideline 7, DAC Timelines to DACs and other system stakeholders.

The DAC activity reports indicate that the amount of time taken to complete the assessment process and issue the final report has continued to grow over the past few years. In 2001, it took DACs 22.6 days on average to issue the final report after completing the assessment.

The increasing numbers of complaints made to the DAC hotline and to the DAC Committee has prompted the DAC Committee to issue a guideline that reiterates the timelines set out in both the SABS and the DAC assessment guidelines.

The DAC Committee acknowledges that there are many factors that can impact a DAC's ability to meet these timeframes. As a result, General Guideline 7 introduces a number of new opportunities for DACs to improve upon their abilities to keep their assessments timely including:

- 1) The opportunity to send out the OCF-11B to the parties in advance of the final, comprehensive DAC report under certain circumstances,
- 2) The use of staged assessments that ensure that essential testing is done first and that the assessment process is stopped once an opinion is reached and nothing further will be gained from further investigations,
- 3) A clarification of how the consensus opinion can be reached by the assessment team, and
- 4) An introduction of a standardized assessment plan that should be approved by the insurer within 3 business days of receipt.

This new guideline reflects the commitment of the DAC Committee to reducing the delays within the DAC system by providing DACs with clearer direction on what to do when they encounter a potential delay in the process.

The Medical/Rehabilitation Report Format, Style and Content Guide

Several months ago, the DAC Committee embarked on a study of medical/rehabilitation DAC assessments and their final reports. The Quality Improvement Subcommittee spent several months

reviewing the final reports submitted by medical/rehabilitation DACs and analysing consistency, style and best practices.

As a result of this review, the DAC Committee drafted the Medical/Rehabilitation Report Format, Style and Content Guide that can be used by medical/rehabilitation DACs as a guide to report writing.

The Guide provides DACs with a checklist of elements that should be included in every DAC report and provides DACs with a self-audit tool to review their own report writing practices and ensure best practices are followed.

Costs Corner: Catastrophic Impairment Assessments

The DAC Committee is committed to providing DACs and other system stakeholders with updates on their current review of costs within the DAC system. As a result, the Committee has undertaken to include a "Costs Corner" in this and future editions of the Information Communique.

A recent study was conducted of the cost of Catastrophic Impairment (CAT) DAC assessments. It is generally acknowledged that CAT DACs are the most complicated of all DAC assessments. As a result, CAT DAC costs are, on average, significantly higher than other assessments.

Costs Corner (Continued)

A review of the CAT DAC assessment costs has indicated that, since 1997, 472 CAT DACs have been completed. Of these assessments, 339 cost less than \$5,000. 453, or 96% of these assessments, cost less than \$10,000. In 2001, only 5 of these assessment cost in excess of \$20,000.

In reviewing the conclusions of these

more expensive assessments, no correlation could be found between the cost of the assessment and the catastrophic impairment findings.

Bloorview MacMillan Children's Centre/ The Hospital for Sick Children

Bloorview is a medical/rehabilitation DAC in Toronto that handles strictly paediatric cases.

Unfortunately, this DAC continues to receive referrals for medical/rehabilitation assessments on adults (over 16 years of age). In these cases, Bloorview must return the referral to the insurer, causing a delay for all of the parties involved.

Bloorview has asked the DAC Committee to post a reminder to all system stakeholders NOT to refer any cases other than paediatrics to its facility.

OCF 14 Permission to Disclose Health Information to a DAC

The DAC Hotline continues to receive a number of inquiries with respect to the validity of modified OCF-14s.

In some cases, the modification adds a timeline and in other cases the permission to provide information to the DAC has been altered to give permission to provide information to the insured's representative.

All DACs are asked to review the OCF-14s included in referral packages to ensure that they have not been altered. DACs must have a properly completed OCF-14 before they are able to proceed with their assessment.

DAC Site Physical Checklist

Over the past few years, the Financial Services Commission of Ontario (FSCO) has periodically conducted site visits of DACs and reviewed their facilities resources.

Most of the criteria being reviewed by FSCO staff are based upon the terms of the Request for Proposal (RFP) that was issued when the DAC system was first established.

Due to the amount of time that has passed since DACs responded to the RFP, DACs have expressed an interest in reviewing the physical site specifications expected by the DAC Committee and FSCO.

DACs will have an opportunity to review these criteria as part of the self-audit process, but the DAC Committee wishes to respond to those requests to review these criteria now as opposed to waiting for a site visit or their opportunity to participate in the self audit.

As a result, the DAC Committee is pleased to enclose with this Communique a list of the physical resource criteria that should represent the standard for DAC facilities.

Arbitration Decisions

The DAC Committee believes that DACs will better understand the important role they play in the dispute resolution process by reviewing examples of how arbitrators have used DAC reports in the decision-making process.

DAC assessors should be aware of these decisions and follow best practices as outlined in the DAC Guidelines in conducting and completing their assessments. Copies of FSCO's arbitration and appeal decisions are available on the FSCO website.

To access these decisions, users are required to obtain a user name and password from the Arbitrations Unit at (416) 590-7202. There is no cost for this service.

Arbitration Decision A00-000364

An analysis of the Post-104

Disability Test and the role of the Designated Assessment Centre

Arbitrator Blackman explores the Post-104 disability test and the role that a DAC plays in the dispute over these benefits.

In this decision, Arbitrator Blackman found that, in applying for a Post-104 Disability DAC, the claimant had met his onus of identifying or trying to find potentially suitable employment.

This decision also provides an in-depth discussion of the Post-104 disability and a claimant's inability to maintain "continuing, competitive and productive employment".

WE'VE HAD QUESTIONS:

Q. Has the Automobile Insurance Policy Unit (AIPU) toughened its standards for reviewing new DAC assessors?

A. The AIPU still reviews practice summaries for new assessors to ensure that they have the relevant assessment experience (minimum of 5 years for med/rehab and 3 years for other DAC types), maintain a balanced practice and are in good standing with the respective regulatory colleges.

The AIPU did recently release a new DAC Assessor Practice Summary Form that asks DACs to identify the type of assessment that the practitioner will be involved in and which team (Core or On-Call) will the assessor be used on.

Any practice summary received by the AIPU that is not on the new form will be returned unapproved. All new submissions must be on the new form.

Q. Can a DAC avoid disclosing a conflict of interest by ensuring that assessors who may have a conflict are excluded from the assessment team?

A. The AIPU continues to receive inquiries

regarding this issue. The cases mainly involve rostered DAC assessors who have seen a claimant for a prior treatment and/or examination but DACs are **not** disclosing this situation as a conflict, assuming it can be avoided by not using the assessor as part of the assessment team for that claimant.

In order to ensure their neutrality, DACs must continue to declare these situations as a conflict of interest. If any assessor on the DAC's roster has seen the claimant in the past, then a conflict of interest exists and has to be disclosed. Nothing precludes the parties from agreeing to use the DAC facility despite this declared conflict of interest.

We encourage feedback regarding this Information Communiqué. Please let us know your experiences, and provide your suggestions, so that we may continue to improve the DAC system. Comments can be directed to:

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