Evaluating Pilot Programs

ISCRR Research Impact Showcuse 2023

ISCRR Institute for Safety, Compensation and Recovery Research

A joint initiative of WorkSafe Victoria and Monash University

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www.iscrr.com.au

Pilot overview and evaluation question

OPPORTUNITY

Extensive consultation completed during 2020 identified the need for greater availability of WorkSafe Victoria's (WSV) Clinical Panel members and greater access to The Clinical Panel. ISCRR Research Impact Showcase 2023





Methodology

Program Logic

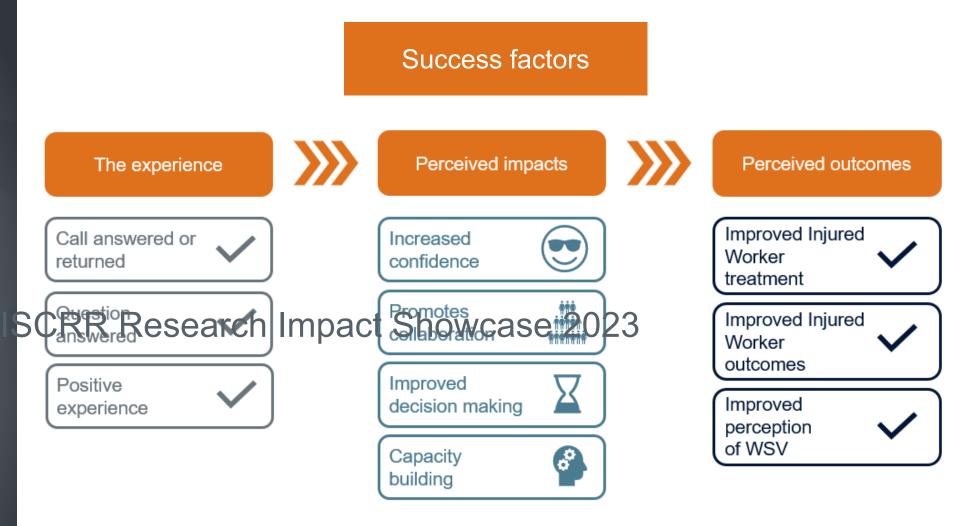
Problem statement: Agents and THPs can't find information to progress IW recovery.

	Inputs	Strategies & Activities	Outputs	Outcomes Short-Term (0-3 months)		Outcomes Medium Term (3-6 months)	Outcomes – Impact: Long Term (6 months+)
	What we invest	What we do	What we create	Results: learnings		Results: changing action	Results: change to the condition
SC	WorkSafe staff External stakeholders: • Primary Health Networks • Treating Health Patibone Realth • Asents Technology and communication materials	Develop • Service Blueprint • Communications • Hotline Conduct • Workprotoco • Internal WS meetings • Evaluation (ISCRR)	Hotline Partnership with Primary Health Networks and Agents	and the correct us THPs and Agents: Called the hot Had a positive	line experience rersand acted a capability and uses the hotline tion is needed re best for Reduced queries are sent to Medical Advisors Quass decisions from hotline callers have become faster Injured workers supported by hotline callers have received support faster	Improved outcomes for injured workers Hotline callers' perception of WorkSafe Victoria improved WorkSafe Victoria understands the knowledge gaps and learning needs of THPs and Agents	
	 Assumptions Agent and THP lack of information is a mechanism hindering IW recovery Hotline operates within existing budget Communications about hotline will reach target audiences Eligible users will call the hotline Internal staffing resources will continue to be available to implement, monitor and report on the pilot Hotline clinical advice and tone is appropriate Treating Health Practitioners and Agents will take on the advice/recommendations provided, to ensure clients outcomes and experience are improved Agents and Treating Health Practitioners have appropriate level of education and experience 				 External Factors Governmental priorities and funding/budgets likely to change External stakeholders needs, buy-in and priorities may change Market needs likely to change, particularly in response to the pandemic Treating Health Practitioner increase/decrease in supply and quality Peak body and other agency (current and future) initiatives with Treating Health Practitioner cohorts 		



Findings:

Barriers and Enablers





Iterative process in action

ISCRR feedbackSCRR Res More promotion required as many THP's still unaware of this service Linicians suggested more informal communication Linician (and Clinical Panel) to share within relevant groups (eg FB groups)



Findings:

Suggestions for next steps



Research Impacts

Dissemination & Diffusion

- Website updated worksafe.vic.gov.au/clinical-support
- A new Stakeholder Pack created
- Undertaking post evaluation workshops with key stakeholders re: ongoing models



- Improved perception of WSV & CP support of THP's
- Positive culture shift within the Division. Pilots were a catalyst to improving evaluation
- Initiated an in-house change management plan
- IW recovery > significant change in treatment pathway (more evidence based), non-value surgery avoided, an

ISCRR Research Impact Showcase 202^{rgease in IW's capacity &}



- Continuation of support for THP's
- Cessation of agent support
- Rebranding of the Clinical Hotline to
- the Clinical Support Service
- Expansion to other disciplines
- Increased engagement channels (on-
- line form submission)
- Creation of a triage role



- Increased understanding of Practice staff as 'Gate Keepers' & now engaging with this group
- Exploring different ways of scheduling case conferences

