

QUALITY ASSURANCE ELEMENTS



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Quality Assurance Elements

Vocational Recovery (VR) Referral Quality Assurance Elements

Reportable VR QA Element # 1: Engagement with worker

Please track and report on in-person meetings separately from other engagement¹.

Ongoing, dynamic, meaningful in-person meetings to address medical treatment and claim barriers, psychosocial barriers, return-to-work (RTW) goals, job search assistance, and VR plans and updates.

NOTE: Video conferencing is not the same as an in-person meeting and cannot be counted as such.

Due to COVID-19 pandemic: In-person meetings should be completed as is safe and consistent with state guidance on safe interactions.

Content Focus: Identification of barriers, medical follow up, understanding of next steps, programs such as Washington Stay at Work Program (WSAW), Preferred Worker (PW), Job Accommodations, and support services.

Other engagement with the worker

Ongoing, dynamic, meaningful phone calls, text messaging, emails, video conferencing, or whatever works best for the worker, to continue to address medical treatment and claim barriers, psychosocial barriers, job search assistance, and VR plans and updates.

NOTE: Worker engagement does not mean brief transactional exchanges of information such as their next appointment with their medical provider or updated contact information. While these are important components of case management, they do not represent engagement as described above and must not be counted as worker engagement. Worker engagement should not include conversations with or through an attorney when the worker isn't present.

Content Focus: Identification of barriers, medical follow up, understanding of next steps, programs such as WSAW, PW, Job Accommodations, and support services.

Reportable VR QA Element # 2: Engagement with employer

Please track and report on-site visits separately from other employer engagement².

On-site meeting with the employer that may include the worker to discuss RTW, produce job analyses (JAs), job descriptions (JDs), or discuss various programs that support return to work.

NOTE: Video conferencing is not the same as an in-person meeting and cannot be counted as such.

Content Focus: Identification of barriers, understanding of next steps, programs such as WSAW, PW, Job Accommodations, and support services.

Due to COVID-19 pandemic: In-person meetings should be completed as is safe and consistent with state guidance on safe interactions.

¹ In-person meetings are considered the gold standard for effective delivery of services and are supported by evidence based best practices.

² Site visits with the employer and worker are considered to be very helpful in developing an effective return to work plan. Separate tracking will help us to assess the frequency and effectiveness of this type of engagement.

Other engagement with the employer

Ongoing, dynamic, meaningful phone calls, text messaging, emails, video conferencing, or whatever works best for the employer, to continue to address barriers, RTW goals, and accommodation assistance.

NOTE: Employer engagement does not mean brief transactional exchanges of information such as scheduling on-site meetings or similar paper correspondence. While these are important components of case management, they do not represent engagement as described above and must not be counted as employer engagement.

Content Focus: Identification of barriers, medical follow up, understanding of next steps, programs such as WSAW, PW, Job Accommodations, and support services.

Reportable VR QA Element # 3: Engagement with the medical providers

Meaningful phone calls, emails, video conferencing (telemedicine appointments), or in person meetings when appropriate that work best for the provider (and the worker when applicable), to continue to address medical treatment and claim barriers, psychosocial barriers and Vocational Recovery Plan(s).

NOTE: Medical provider engagement does not mean brief transactional exchanges with the medical provider such as mailing JAs/JDs or medical questionnaires. While these are important components of case management, they do not represent engagement as described above and must not be counted as medical provider engagement. Video conferencing (telemedicine appointment) is not the same as an in-person meeting and cannot be counted as such.

Due to COVID-19 pandemic: In-person meetings should be completed as is safe and consistent with state guidance on safe interactions.

Content Focus: Identification of barriers, medical follow up, understanding of next steps, programs such as WSAW, PW, Job Accommodations, and support services.

Reportable VR QA Element # 4: Completion / update of the VR Plan

Develop and modify the VR plan in collaboration with the worker using guidance found in the VR Reference Manual, VR Plan Instructions and in keeping with Washington Administrative Code (WAC) requirements.

Vocational Recovery (VR) Validation Points

Firm reported QA data is consistent with information found in firm records during firm validation.

Engagement with the stakeholders is meaningful, consistent, proactive and documented.

Services provided emphasize worker-centric planning that aims to reduce needless work disability.

Progress reports and closing reports document meaningful interactions with the worker, employer, and medical providers to address goals, RTW plans, concerns, barriers and are thorough, yet concise, complete and submitted timely per WAC requirements.

Ability to Work Assessment (AWA) Quality Assurance Elements

Reportable AWA QA Element # 1: Initial meeting with the worker within 15 days*

Topics to be covered and documented for purposes of validation:

- Are there changes to the worker's goals as they move from VR to AWA; is there a plan to address these changes?
- Vocational rehabilitation counselor (VRC) explains the referral type.
- VRC discusses worker rights and responsibilities (per L&I published pamphlet).
- VRC will obtain and verify work history.
- VRC will discuss next steps and referral processes.
- VRC will inform worker of potential referral outcomes – prepare for soft landing, eligibility, or inability to benefit recommendation.

NOTE: The initial meeting with the worker within 15 days can be facilitated through meaningful phone calls or video conferencing, however, these aren't the same as an in-person meeting and cannot be counted as such.

Due to COVID-19 pandemic: In-person meetings should be completed as is safe and consistent with state guidance on safe interactions.

Reportable AWA QA Element # 2: AWA work products completed and discussion with worker within 30 days*

Documentation to be captured:

- Work history validated / gathered.
- Transferable skill analysis completed and discussed with worker.
- JAs/JDs developed and submitted to claim file.
- Discussion with worker on what the work products are, how they are being used, and potential next steps – essentially ensuring the worker is clear on where they are in the process.

NOTE: Discussion with the worker within 30 days can be facilitated through meaningful phone calls or video conferencing however, these aren't the same as an in-person meeting and cannot be counted as such.

Due to COVID-19 pandemic: In-person meetings should be completed as is safe and consistent with state guidance on safe interactions.

Reportable AWA QA Element # 3: Engagement with the worker and Next Steps Plan

Ongoing, dynamic, meaningful phone calls, text messaging, emails, video conferencing, in-person meetings or whatever works best for the worker, to continue to address medical treatment and claim barriers, psychosocial barriers, job search assistance and identification and monitoring of next steps³.

NOTE: Worker engagement does not mean brief transactional exchanges of information such as their next appointment with their medical provider or updated contact information. While these are important components of case management, they do not represent engagement as described above and must not be counted as worker engagement. Video conferencing is not the same as an in-person meeting and cannot be counted as such.

Due to COVID-19 pandemic: In-person meetings should be completed as is safe and consistent with state guidance on safe interactions.

Content Focus: Identification of barriers, medical follow up, understanding of next steps, programs such as WSAW, PW, Job Accommodations, and support services.

Reportable AWA QA Element # 4: Engagement with medical providers

Meaningful phone calls, emails, video conferencing (telemedicine), or in person meetings when appropriate in any format that works best for the provider (and the worker when applicable) to continue to address medical treatment and claim barriers, psychosocial barriers, and Next Steps Plan and safely returning workers to work.

JAs/JDs submitted to appropriate provider

NOTE: Worker engagement does not mean brief transactional exchanges of information such as their next appointment with their medical provider or updated contact information. While these are important components of case management, they do not represent engagement as described above and must not be counted as worker engagement. Video conferencing is not the same as an in-person meeting and cannot be counted as such.

Due to COVID-19 pandemic: In-person meetings should be completed as is safe and consistent with state guidance on safe interactions.

Content Focus: Identification of barriers, medical follow up, understanding of next steps, programs such as WSAW, PW, Job Accommodations, and support services.

³ Per the direction of our Vocational Advisory Committee members, the department is not planning to publish a Next Steps Plan but VRCs are encouraged to use the Vocational Recovery Plan template.

Reportable AWA QA Element # 5: Exit Meeting with the Worker **

Meaningful meeting (phone call, video conference, in-person when appropriate) outlining the recommendation, supporting documentation and next steps plan. Also notify the employer of the recommendation.

NOTE: A letter to the worker outlining conclusion of vocational services and the VRC's recommended outcome must not be counted as an exit meeting with the worker. While, at times, this may be the only way to communicate conclusion of vocational services and the recommended outcome it must not be counted as an exit meeting with the worker. Firms must report in their validation why their vocational providers did not conduct an exit meeting with the worker. Video conferencing is not the same as an in-person meeting and cannot be counted as such.

Due to COVID-19 pandemic: In-person meetings should be completed as is safe and consistent with state guidance on safe interactions.

Content Focus: Identification of barriers, medical follow up, understanding of next steps, programs such as WSAW, PW, Job Accommodations, and support services. Engage soft-landing and continued RTW support as agreed upon. See pages 53-56 of Vocational Recovery Reference Manual. For able to work outcomes ensure job placement services are discussed and related materials are provided, such as completed resume, LMS findings, PW and anticipate moving to claim closure. If plan development (PD) is recommended ensure next steps are clear, and prepare the worker for the first PD meeting where retraining goals and possible retraining/on-the-job (OJT) training locations may be discussed.

* Sections may not need to be reported after the initial meeting.

** This can only be reported and validated at the conclusion of AWA.

Ability to Work Assessment (AWA) Validation Points

Firm reported QA data is consistent with information found in firm records during firm validation.

Engagement with the stakeholders is meaningful, consistent, proactive and documented.

Services provided emphasize worker-centric planning that aims to reduce needless work disability and duration.

Progress Reports and Closing Reports document meaningful interactions with the worker, (potentially the employer), and medical providers to address goals, RTW plans, concerns, barriers and are thorough, complete and submitted timely per WAC requirements.

Preferred Worker discussions with the workers and applications completed if appropriate.

Plan Development (PD) Quality Assurance Elements

Reportable PD QA Element # 1: Assigned counselor to meet with worker in initial meeting, with ongoing, frequent communications

Topics to be covered and documented for purposes of validation:

- Provide all appropriate brochures and review rights and responsibilities related to Plan Development, Plan Implementation Options 1 and 2, and if applicable, Structured Settlement.
- Discuss timelines for Plan Development and Options 1 and 2.
- Discuss pre-job accommodations and Preferred Worker benefits.
- Actively explore retraining goal(s) and training site(s).
- Assist the worker with admissions, entrance testing, advising, curriculum development, registration, etc.

Note: Phone call or video conference is an acceptable method for the assigned counselor to meet with the worker, however, these are not the same as an in-person meeting and cannot be counted as such.

Due to COVID-19 pandemic: In-person meetings should be completed as is safe and consistent with state guidance on safe interactions.

Reportable PD QA Element # 2: Certified plan submitted by the firm with all attachments needed to support the training plan and job goal

Firm representative (must be a credentialed and approved vocational provider) certifies the plan contains the following elements:

- Attachments include but aren't limited to: Encumbrances (time/cost/travel and if needed, room/board following per diem rates), signed accountability agreement, tools and equipment ownership agreement with quote if necessary, medical documentation to support goal and/or accommodations, approved JA, labor market survey/research (LMS/R), curriculum/schedule of classes/course descriptions that shows how they will meet skills reported in the LMS, attendance and performance policies, vocational and/or placement testing, mileage verification, etc.
- If private school or on-the-job training (OJT), consider if progress reports with benchmarks from instructors need to be written into the plan proposal to assist in monitoring progress indicators.
- If private school, ensure the school is in good standing with Labor & Industries and the Workforce Training and Education Coordinating Board.
- Submitted retraining plan at least 30 days before start date.

Plan Development (PD) Validation Points

Firm reported QA data is consistent with information found in firm records during firm validation.

Engagement with the stakeholders is meaningful, consistent, proactive and documented.

Services provided emphasize worker-centric planning that aims to reduce needless work disability and duration.

Progress reports document meaningful interactions with worker to identify interest, potential job goals, and barriers and resolutions, outlining progress toward plan submission, and are submitted timely per WAC requirements.

If necessary, 'good cause' plan development extension was submitted through EVOC.

Verify Preferred Worker applications were submitted/approved.

Plan Implementation (PI) Quality Assurance Elements

Reportable PI QA Element # 1: Have meaningful interaction with the worker every 14 days

This interaction should be in whatever form is best for the worker including in-person, telephone, video conferencing, and email.

Topics to be covered and documented for purposes of validation:

- If computer, tools, equipment, or clothing are pre-approved and needed prior to the start of training, ensure items are ordered/encumbrances forwarded with adequate time for delivery, that delivery is confirmed and the worker is kept up to date on progress as applicable.
- If daycare or housing assistance is pre-approved, ensure vendors are notified and have proper forms for billing.
- Pre-job accommodation application/report for any ergonomic accommodations submitted for approval, and upon approval, ordered and delivery confirmation made (assuming ergonomic recommendations from attending provider (AP) and/or ergonomic evaluation completed, worker signs Pre-job Accommodation Ownership Agreement, and vendor quote obtained in PD) – updating the worker as applicable.
- Monitor grades/progress/attendance with biweekly discussions with the worker.
- If there are issues with grades, progress, and attendance, brainstorm with training site and worker on how to resolve.
- Is tutoring needed? Are they registered with disability services and have accommodations in place? Other solutions?
- If worker is failing any classes or there are any concerns regarding plan success, the claim manager/vocational services specialists (CM/VSS) is updated as soon as possible via EVOC and/or phone call, and barriers are addressed in progress reports along with any potential resolutions.

Due to COVID-19 pandemic: In-person meetings should be completed as is safe and consistent with state guidance on safe interactions.

Reportable PI QA Element # 2: Discuss final deadline for Option 2* with the worker

Prior to the final two weeks before the end of the first academic quarter or three months of retraining. Meeting and discussion with worker must be documented for validation purposes.

NOTE: Discussion with the worker should be in whatever form is best for the worker including in-person, telephone, video conferencing, and/or email.

Reportable PI QA Element # 3: Engagement with the training site / instructors (if necessary)

Encumbrances sent to training site (original and following approval of any plan modification).

Check in with training site (college, private career school, or OJT), the trainer, or appropriate representative as needed for progress and to address attendance, performance, benchmarks/progress, barriers and quarterly monitoring of funds expended.

Reportable PI QA Element # 4: Discuss return to work needs with the worker

Review PW benefits and assist with job search assistance with the worker when deemed appropriate to provide a soft landing and to support returning to work post training. Ensure that the CM is aware of plan end date and is planning for claim closure as well.

NOTE: Discussion with the worker should be in whatever form is best for the worker including in-person, telephone, video conferencing, and email, however, these are not the same as an in-person meeting and cannot be counted as such.

Due to COVID-19 pandemic: In-person meetings should be completed as is safe and consistent with state guidance on safe interactions.

Content Focus: Engage soft-landing and continued RTW support as agreed upon. See pages 53-56 [Vocational Recovery Reference Manual](#).

* Section will only be reportable once during PI.

Plan Implementation (PI) Validation Points

Firm reported QA data is consistent with information found in firm records during firm validation.

Engagement with the stakeholders is meaningful, consistent, proactive and documented.

Services provided emphasize worker-centric planning that aims to reduce needless work disability and duration.

Progress reports document meaningful interactions with worker to identify challenges, resolve problems, proactively plan for employment, and are submitted timely per WAC requirements.

Plan modifications are completed as needed and new Plan Modification Accountability Agreement signed so worker understands purpose of the change.