POLICY REPORT

Volume 12, Number 1 March 1999

WSIB Workplace Safety & Insurance Board
ONTARIO
CSPAAT Commission de la sécurité professionnelle et de l'assurance contre les accidents du travail

INSIDE

Self-reliance and *early and safe return to work*

Getting an injured worker back to work is best accomplished by the people that know the workplace best—the worker and the employer.

Self-reliance is the principle that underlies the Board's new approach to post-injury return to work activities, or early and safe return to work (ESRTW). It's not as new as it seems, though. Well before Bill 99 moved the Board away from directly providing vocational rehabilitation, self-reliant employers managed their own return-to-work programs, as part of comprehensive occupational health and safety programs. The Board's role in these cases was essentially supportive: it became involved only if the employers' and workers' efforts failed. In effect, Bill 99 has made it a requirement that **all** workplaces practice self-reliance.

In support of this approach, the Board has implemented a number of ESRTW and related policies (see side-bar). Rather than describing each policy in turn, the following case study—admittedly an idealized and generalized one—shows how the ESRTW process could unfold. Listed below each step are some of the responsibilities or actions of the workplace parties (employer and worker), the treating health care professional, and the Board.

ESRTW - A Case Study - Self-reliance in action

Background - CDP is a small employer with 15 employees that has been in business for 3 years. In that time there have been 4 work-related accidents, with none that resulted in more than 3 weeks of lost time from work. Because the company was late in reporting these accidents the Board has charged the company 4 times for late reporting.

The company is aware of Bill 99 and the Board's new approach to ESRTW, and realizes that the time has come for a comprehensive health and safety program that includes a strategy for preventing and dealing with work-related accidents.

ESRTW & related policies

The Goal of ESRTW and the Roles of the Parties - outlines the roles of the workplace parties and the goal of ESRTW, and also deals with related issues, including workplace modifications, benefits, and travel expenses.

Resources and Evaluations - lists the types of resources that the decision-maker may suggest the workplace parties obtain.

Mediation Services - specifies how the Board mediates disputes between the workplace parties.

Workers' Initial Accident-Reporting Obligations - outlines a worker's responsibilities once a workplace injury has occurred.

Employers' Initial Accident-Reporting Obligations - explains the steps to be taken by an employer when a worker has a workplace injury.

ESRTW—A Case Stu

Workplace committed to prevention, health, and safety

The owner and the general manager of the company endorse the idea of a comprehensive health and safety program, and devise a plan to create and implement one. They meet with the staff to get their input. The parties agree that

- everyone is responsible for health and safety
- supervisors and workers should have training in health and safety
- workers will select a health and safety representative*
- health and safety performance should always be improved
- health and safety should be built into all jobs in the workplace to control hazards at their sources.

The plan is being developed when a test case comes up—a worker has an accident.

The accident

Bridget lifts a 20 lb. box from under her workstation and twists to place it on her workbench. She feels an immediate, sharp pain in her lower back. The pain persists and makes it difficult for her to straighten up. She reports the accident to her supervisor, Dave.

Dave arranges for Bridget to be driven to the local hospital emergency department. While Bridget awaits the ride, Dave gets her accident history and starts completing the Employers' Report of Injury/Disease, Form 7. After Bridget signs the form, Dave gives her the worker's copy.

Dave also completes the background information on the Functional Abilities Form for Timely Return to Work (FA form), and explains its use to Bridget. Bridget takes the FA form to give to her doctor.

Bridget tells Dave that she will call him after the medical attention to advise him if the doctor recommends a layoff from work.

Medical attention

The emergency doctor diagnoses a low back strain, orders X-rays, and prescribes muscle relaxants. Bridget is told not to return to work, and to see her family doctor for follow-up and further treatment if necessary. Bridget calls Dave to tell him of the doctor's recommendation.

The next day Bridget sees Dr. Myers, her family doctor, and gives her the FA form. Dr. Myers

- confirms the diagnosis
- recommends 4 to 6 weeks of physiotherapy
- authorizes a layoff for one week, and
- suggests returning to light work (e.g., work that does not involve any lifting) after the layoff.

Dr. Myers completes the Form 8 and the FA form, and mails them to the Board and the employer. The doctor gives Bridget her copy of the FA form directly.

The employer

- provides a safe workplace
- provides a first aid station
- ensures that someone trained in first aid is on duty at all times, and
- permits Board staff access to the premises to ensure that the workplace is safe.

The Board

- promotes prevention, workplace safety and ESRTW best practices
- motivates and supports workplaces to become self-reliant in health and safety
- through its partners, such as Safe Workplace Associations, supports incentive, training, and promotion programs, including
  - Certification Training
  - First Aid Program
  - Young Worker Awareness Program
  - Safe Communities Incentive Program.

For details about Prevention, call Corporate Communications at (416) 344-4200 or 1-800-387-0750, Ext. 4200, and ask for the brochure, *The WSIB & Prevention.*

The employer

- provides immediate first aid
- records any first aid treatment or advice given to the worker
- if required, provides transportation to the doctor or hospital
- pays the worker full wages for the day of injury
- completes the Form 7 and sends it to the Board within 3 days of learning of an accident that causes a worker to
  - be absent from regular work
  - need modified work
  - earn less than regular pay at regular work, or
  - obtain health care
- gives the worker an FA form (see insert) to take to the treating health professional.

The worker

- reports the accident to the employer
- signs the Form 7, thereby making a claim and consenting to the release of functional abilities information.

The worker

- asks the treating health professional to complete the FA form
- co-operates and participates in medical rehabilitation.

The treating health professional

- completes and submits to the Board the Physician's First Report, Form 8 (stocked by the health professional)
- completes and submits to the Board the FA form, and gives copies to the worker and the employer
- identifies the most appropriate treatment for the worker's injury
- ensures the worker receives timely access to treatment
- discusses the possibility of a return to work as soon as the worker is able.

** A workplace with more than 5, but less than 20, workers is not required to have a Joint Health and Safety Committee. Instead, workers select a health and safety representative from their peers. For more information refer to s.8 of the* Occupational Health and Safety Act and Regulations for Industrial Establishments (RSO, 1990).

udy: Self-reliance in action

Communication between the workplace parties

Bridget calls Dave after her appointment with Dr. Myers to tell him the doctor's recommendation. They discuss the possibility of suitable work. He thinks that he will be able to arrange light work in one or two weeks. They agree to keep in touch—Bridget to advise Dave of her recovery, and Dave to advise Bridget of the availability of suitable work.

Dave also mentions that he and the health and safety representative have worked out a way to deliver supplies to workstations that doesn't involve heavy lifting. This will prevent future accidents.

The Board

- tells each party their obligations.

The worker and employer

- contact each other as soon as possible after the injury, and maintain communication throughout the period of recovery or disability
- work together to identify a job consistent with the worker's functional abilities, that, if possible, restores the worker's pre-injury earnings
- give the Board any information the Board requests about the return to work activities
- notify the Board of any change in the worker's medical condition or change in the availability of suitable work
- notify the Board of any difficulties, obstacles, or disputes with each other throughout the ESRTW process.

ESRTW activities

Bridget starts her physiotherapy program and calls Dave to keep him informed. She also lets him know that the Board has approved her claim.

Dave receives the FA form and notes that Bridget cannot do any lifting. Dave calls the decision-maker at the Board for advice because the company does not, as yet, have an ESRTW plan. The decision-maker suggests that the employer arrange an ergonomic assessment of the workplace and that Bridget undergo a functional abilities evaluation (FAE).

The decision-maker, Dave, and Bridget agree to the ergonomic and the functional abilities assessments, and that a return to work date will be discussed based on the results.

The Board

- contacts the worker and employer to determine whether any information is needed to help in the worker's early return to employment. The decision-maker may suggest that the workplace parties need
  - assistance in clarifying the worker's functional abilities
  - general ESRTW program development, and evaluation
  - information about sources of return-to-work assistance, agencies that conduct evaluations, workplace modifications, and assistive devices
- provides mediation services at the request of the workplace parties, or offers mediation services on its own initiative if difficulties and obstacles are identified through a review of the return to work activities
- ensures that the worker receives the appropriate loss of earnings benefits (LOE).

Worker returns to work

Bridget and Dave discuss the FAE findings and the ergonomic assessment. The FAE provides information regarding, for example, Bridget's limitations, while the ergonomic assessment gives suggestions to Dave on how to accommodate Bridget's lifting restriction.

Bridget and Dave agree on a suitable and available job that is within Bridget's functional abilities and at no wage loss.

Bridget returns to the identified job and continues with physiotherapy after work hours. Bridget contacts the decision-maker with her return-to-work date.

The worker

- informs the Board of the expected and actual return to work date.

The Board

- stops LOE benefits on the date the worker returns to work at no wage loss, or pays partial LOE benefits if the worker continues to experience a wage loss while at work
- measures the success of the workplace parties' ESRTW activities by considering whether
  - the worker returns to suitable work with the accident employer, and
  - the worker's pre-injury earnings are restored.

ESRTW not successful

What happens if the ESRTW process is not successful—if, for instance, despite the best efforts of the workplace parties the worker is not successful in returning to work? Or, what if the worker returns to work but the suitable and available job pays significantly less than the pre-injury wage? If so, the Board may consider conducting a labour market re-entry (LMR) assessment to determine if the worker requires an LMR plan to enable a return to the workforce.

LMR will be explained in the next issue of *Policy Report*.

New & Restored WSIB Firefighter Policies

Two policies will have a positive impact on the handling of firefighter claims in Ontario.

One is a new occupational disease policy which recognizes that firefighters with on-call fire smoke exposure have an increased risk of developing brain cancer or lymphoid leukemia.

The second policy is a result of Bill 92, which corrects an oversight in the Act by restoring

- the method of calculating volunteer firefighters and ambulance worker's average earnings, and
- their rights to re-employment and early and safe return to work (ESRTW) with their regular employer.

Should ESRTW be unsuccessful, these workers would be entitled to labour market re-entry services.

New: occupational disease policy for urban firefighters

Studies show that full-time, urban firefighters have an elevated risk of developing

- brain cancer after 20 or more years of occupational exposure, and
- lymphoid leukemia after 30 or more years,

and that these diseases are likely caused by their employment.

Also the Board will adjudicate the claims of firefighters who have sustained other cancers, taking into consideration the intensity, type, and duration of occupational exposures, and the presence of non-occupational causes for the disease in each case.

This policy does not apply to forest/wildland or part-time firefighters.

Restored: pre-1998 policy approach for determining volunteer firefighter benefits

Bill 92 restores the way 850 Schedule 1 employers and 130 Schedule 2 municipalities select the amount of coverage for their volunteer fire and ambulance workers. This means that retroactive to January 1, 1998,

- all workers of volunteer fire and ambulance brigades are covered at the amount selected by the employer/municipality, and premiums are based on this amount
- Schedule 1 municipalities do not have to report to Board the actual employment earnings of their volunteer fire and ambulance brigade workers
- the volunteer's actual (regular) employer is responsible for
  - maintaining employment benefits under section 25 of the Act
  - offering re-employment to an injured volunteer, and
  - participating in return to work activities.

For copies of the approved firefighter policies, please contact Policy Publications at (416) 344-4355, or toll-free at 1-800-387-0750, Ext. 4355.

St. Catharines Office Re-Located

The St. Catharines office of the Workplace Safety and Insurance Board has moved to

301 St. Paul Street
8th Floor
St. Catharines ON
L2R 7R4

The office's general enquiry telephone and fax numbers stay the same. They are

General enquiry line *(local)*	(905) 687-8622
General enquiry line *(toll-free)*	1-800-263-2484
Fax number	(905) 687-7117

POLICY REPORT

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Policy Report subscriptions are free.

Policy Report is published by the Benefits Policy Branch of the Workplace Safety and Insurance Board. If there is any conflict between information in this publication and the *Workplace Safety and Insurance Act* or approved policy documents, the Act or the policy governs.

In this publication, the "old Act" refers to the *Workers' Compensation Act*. The "new Act" refers to the *Workplace Safety and Insurance Act*.

Benefits Policy also publishes the *Operational Policy* manual, the *Employer Classification* manual, and a bilingual lexicon.

To purchase these publications, or to receive *Policy Report*, please call Policy Publications at (416) 344 - 4355, or 1-800-387-0750, ext. 4355.

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Functional Abilities Form

To receive workplace insurance benefits, a worker must apply for benefits within 6 months of the date of an accident or the onset of disease. When applying for benefits, the worker must also consent to the worker's health professional disclosing functional abilities information to the employer. Failure to file a claim or provide consent for the release of functional abilities information may result in the Board not providing benefits.

To help employers and workers arrange an early and safe return to work, the Board developed the Functional Abilities Form for Timely Return to Work, or FA form. The form is used to determine the worker's physical capabilities and limitations and to plan a return to work.

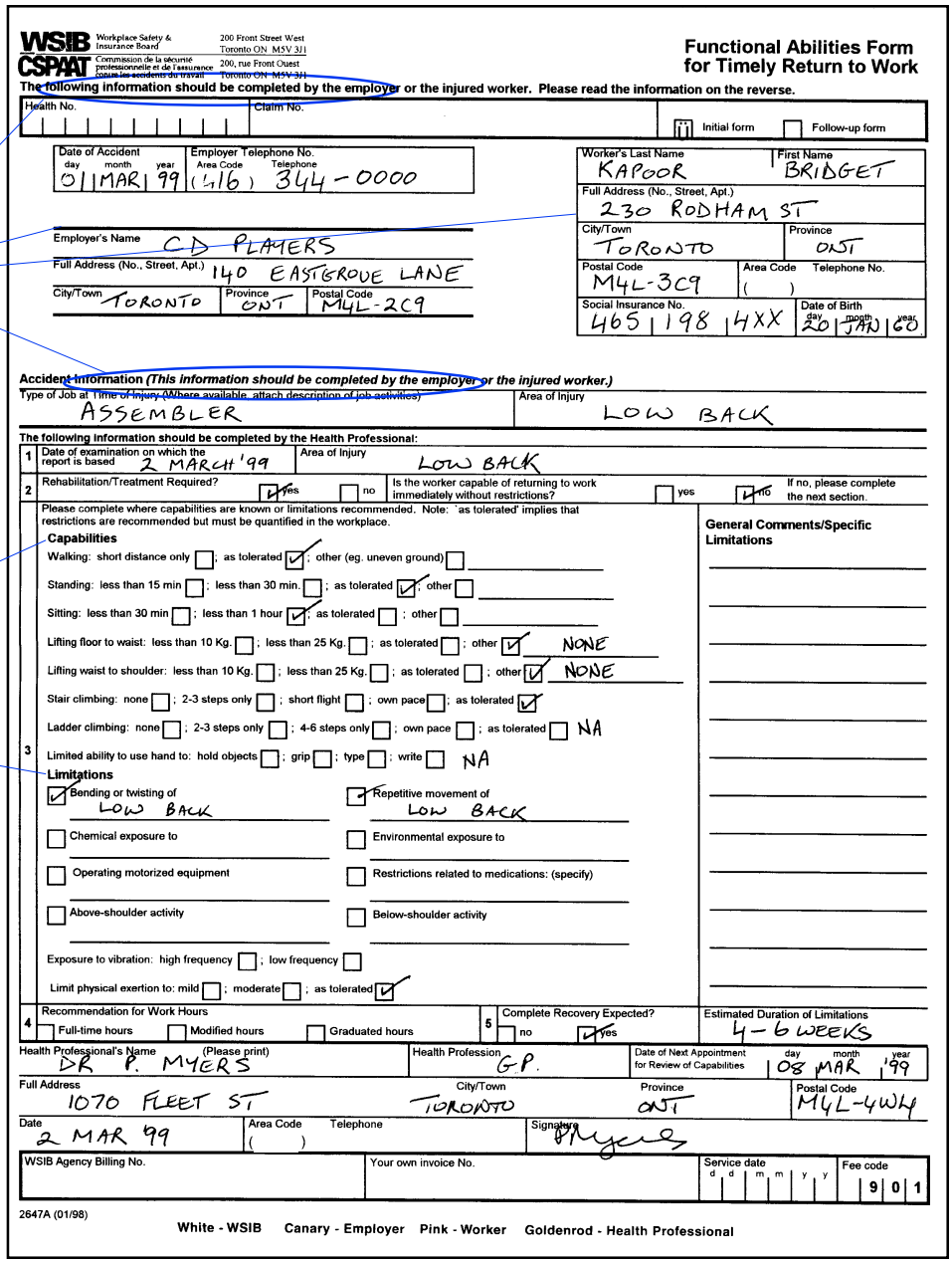
The form can only be completed by the health professional treating the worker. Diagnostic information is not included on the form and completing this form does not replace any of the health professional's other reporting obligations.

Illustrated below is a sample FA form. Employers may order these forms from the Board, or they may develop similar forms themselves. If the workplace parties use a form specific to their workplace, the employer also needs the separate consent of the worker. The Board pays the health professional, however, only if the information is submitted on the Board-developed form.

Employers, workers, and health professionals who have questions about this form may call 1-800-387-0750.

The worker or the employer can complete the required background information.

The health professional completes the sections of the form detailing the worker's **capabilities** and **limitations**. If necessary an additional page may be attached to the form to provide more specific information.



WSIB Workplace Safety & Insurance Board — 200 Front Street West, Toronto ON M5V 3J1
CSPAAT Commission de la sécurité professionnelle et de l'assurance contre les accidents du travail — 200, rue Front Ouest, Toronto ON M5V 3J1

Functional Abilities Form for Timely Return to Work

The following information should be completed by the employer or the injured worker. Please read the information on the reverse.

Health No. | Claim No. | ☒ Initial form ☐ Follow-up form

Date of Accident: day 01 month MAR year 99
Employer Telephone No.: Area Code (416) Telephone 344-0000
Employer's Name: CD PLAYERS
Full Address (No., Street, Apt.): 140 EASTGROVE LANE
City/Town: TORONTO | Province: ONT | Postal Code: M4L-2C9

Worker's Last Name: KAPOOR | First Name: BRIDGET
Full Address (No., Street, Apt.): 230 RODHAM ST
City/Town: TORONTO | Province: ONT
Postal Code: M4L-3C9 | Area Code Telephone No. ( )
Social Insurance No.: 465 198 4XX | Date of Birth: day 20 month JAN year 60

Accident Information *(This information should be completed by the employer or the injured worker.)*
Type of Job at Time of Injury (Where available, attach description of job activities): ASSEMBLER
Area of Injury: LOW BACK

The following information should be completed by the Health Professional:

1 Date of examination on which the report is based: 2 MARCH '99 | Area of Injury: LOW BACK

2 Rehabilitation/Treatment Required? ☒ yes ☐ no | Is the worker capable of returning to work immediately without restrictions? ☐ yes ☒ no — If no, please complete the next section.

Please complete where capabilities are known or limitations recommended. Note: 'as tolerated' implies that restrictions are recommended but must be quantified in the workplace.

Capabilities

Walking: short distance only ☐; as tolerated ☑; other (eg. uneven ground) ☐
Standing: less than 15 min ☐; less than 30 min. ☐; as tolerated ☑; other ☐
Sitting: less than 30 min ☐; less than 1 hour ☑; as tolerated ☐; other ☐
Lifting floor to waist: less than 10 Kg. ☐; less than 25 Kg. ☐; as tolerated ☐; other ☑ NONE
Lifting waist to shoulder: less than 10 Kg. ☐; less than 25 Kg. ☐; as tolerated ☐; other ☑ NONE
Stair climbing: none ☐; 2-3 steps only ☐; short flight ☐; own pace ☐; as tolerated ☑
Ladder climbing: none ☐; 2-3 steps only ☐; 4-6 steps only ☐; own pace ☐; as tolerated ☐ NA
3 Limited ability to use hand to: hold objects ☐; grip ☐; type ☐; write ☐ NA

Limitations

☑ Bending or twisting of: LOW BACK
☑ Repetitive movement of: LOW BACK
☐ Chemical exposure to
☐ Environmental exposure to
☐ Operating motorized equipment
☐ Restrictions related to medications: (specify)
☐ Above-shoulder activity
☐ Below-shoulder activity
Exposure to vibration: high frequency ☐; low frequency ☐
Limit physical exertion to: mild ☐; moderate ☐; as tolerated ☑

General Comments/Specific Limitations

4 Recommendation for Work Hours: ☐ Full-time hours ☐ Modified hours ☐ Graduated hours
5 Complete Recovery Expected? ☐ no ☒ yes
Estimated Duration of Limitations: 4-6 WEEKS

Health Professional's Name (Please print): DR P. MYERS
Health Profession: GP.
Date of Next Appointment for Review of Capabilities: day 08 month MAR year 99
Full Address: 1070 FLEET ST
City/Town: TORONTO | Province: ONT | Postal Code: M4L-4W4
Date: 2 MAR 99 | Area Code Telephone ( ) | Signature: P Myers
WSIB Agency Billing No. | Your own invoice No. | Service date | Fee code: 901

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