

# UNDERSTANDING THE WCB



## Guide for Employers



[worksafesask.ca](http://worksafesask.ca)

**WorkSafe**<sup>TM</sup>  
SASKATCHEWAN

*Work to live.*

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# INTRODUCTION

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## 0.1 Welcome to *Understanding the WCB ... Guide for Employers*

WorkSafe Saskatchewan believes that all workplace injuries are predictable and preventable. With commitment from all of us, Saskatchewan **can** achieve zero workplace injuries, and be the safest and most productive province in Canada.

*Understanding the WCB* is part of the larger WorkSafe Saskatchewan initiative to create safety and injury prevention awareness. It provides support so that you can reach the ultimate WorkSafe Saskatchewan goal – Mission: Zero – zero injuries, zero fatalities, zero suffering.

This guide gives owners of small businesses quick access to information on some common Saskatchewan Workers' Compensation Board's (WCB) processes and forms. The WCB encourages you to visit the WorkSafe Saskatchewan website for more resources ([www.worksafesask.ca](http://www.worksafesask.ca)).

This guide is divided into sections for easy use. You can review the steps of a safety system or quickly look up information on how to file a claim if one of your workers suffers an injury.

Also included is the WCB's fictional account of a small business to provide examples of some common situations – what to do and, in some cases, what **not** to do.

We hope you find this guide useful.

### Acknowledgements

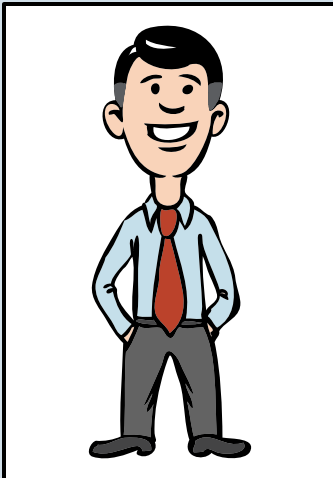
This publication would not have been possible without the generous assistance of various organizations and individuals involved with business in Saskatchewan. The Saskatchewan Workers' Compensation Board would like to thank the Workers' Compensation Board of the Northwest Territories and Nunavut.

*Note: This guide is for reference purposes only. The story of Gil's Gears is entirely fictional. Any similarity to a real person, workplace or event is coincidental. Information provided in this document is believed to be accurate at time of publication. Please consult the applicable legislation for your industry.*

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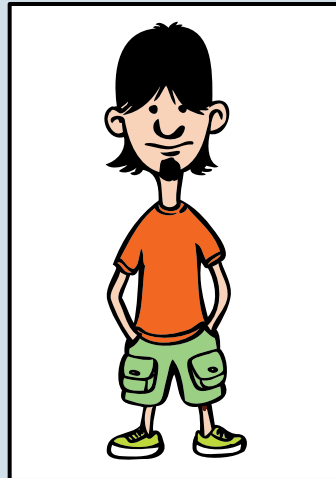
## 0.2 Meet our cast

### Main cast



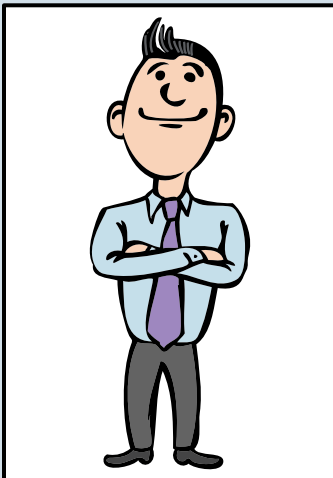
#### **Mike Johnson**

Gil's son  
Business degree  
Became President and General Manager of Gil's Gears at 27 and has been President for 25 years



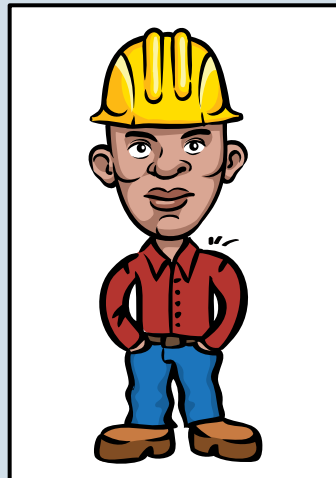
#### **Calvin**

Second-year engineering student  
Co-op work term



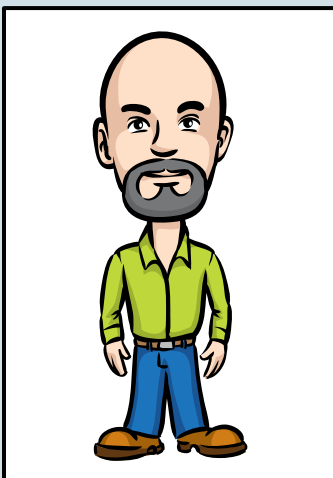
#### **Rick Johnson**

Mike's brother, Gil's son  
Engineering degree  
Started with his dad and Mike and has been Operations Manager at Gil's Gears for 23 years



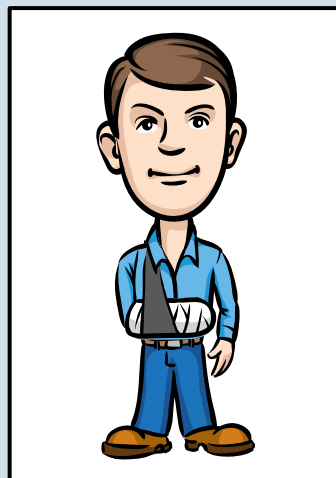
#### **Larry**

Machinist  
Been with Gil's Gears for 37 years  
Occupational Health Committee (OHC) co-chair (worker representative)



#### **Jack**

Production Manager  
Occupational Health Committee (OHC) co-chair (employer representative)  
Been with Gil's Gears for nine years

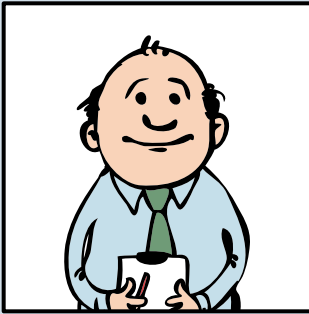


#### **Vincent**

Engineer/contractor hired to introduce new technology  
Software development expertise

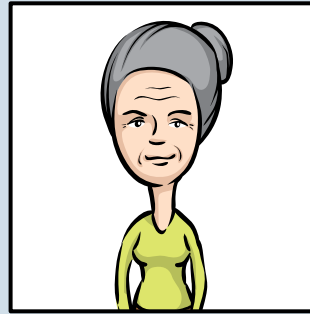


## Supporting cast



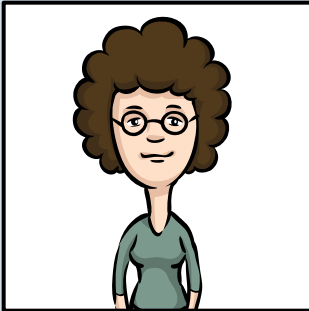
### **Gil Johnson**

Established Gil's Gears at the age of 26 and ran the business for 33 years



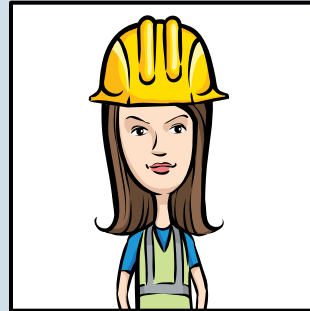
### **Marian**

Accountant  
Been with Gil's Gears for 31 years  
Ready to retire



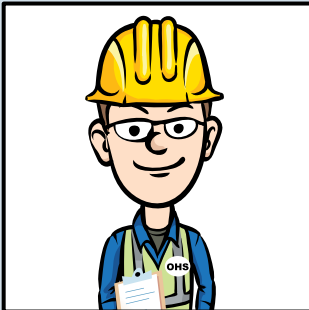
### **Nora Johnson**

Gil's wife  
Throughout her career, assisted Gil with the office paperwork



### **Rebecca**

HR/Office Manager  
Occupational Health Committee (OHC) member  
Been with Gil's Gears for five months



### **Christopher Johnson**

Mike's eldest son  
Engineer  
Occupational Health Committee (OHC) member  
Been with Gil's Gears for four years

## 0.3 Our fictional small business: Gil's Gears

Located in a large town in rural Saskatchewan, welder Gil Johnson founded Gil's Gears as a gear manufacturing company when he was 26. The company has grown to employ 32 people and is known throughout western Canada as "the place to go for gears."

Gil's Gears manufactures custom gears and gear assemblies and stocks parts for most common equipment lines. Gil's two sons, Mike and Rick, took over the business when Gil retired.

In their teens, Mike and Rick worked at Gil's Gears for their father. They love the business and know it inside and out. Mike took over the reins from his father after receiving his business degree. Mike is President, General Manager and co-owner of Gil's Gears. Rick joined Mike after completing his engineering degree. Rick is Operations Manager and co-owner.

Of the 32 workers, most have been with Gil's Gears for several years and are committed to the success of the business.



# REGISTER YOUR COMPANY WITH THE WCB

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## 1.1 Why do we have a WCB anyway?

### A historic compromise – The Meredith Principles

Prior to 1911, injured workers could only be compensated for a work injury by suing the employer. The only way that an employer was protected from the cost of a work injury was to win the lawsuit.

Workers were unprotected and employers risked losing their businesses if a worker was injured and was successful in a lawsuit. There were cases in which entire small communities were devastated when lawsuits over work injuries bankrupted the town's one large employer.

After 1911, many places in Canada adopted a set of principles developed after an inquiry in Ontario. The chair of the inquiry was Sir William Meredith, and thus the principles are still known as the Meredith Principles. These govern the Saskatchewan WCB today:

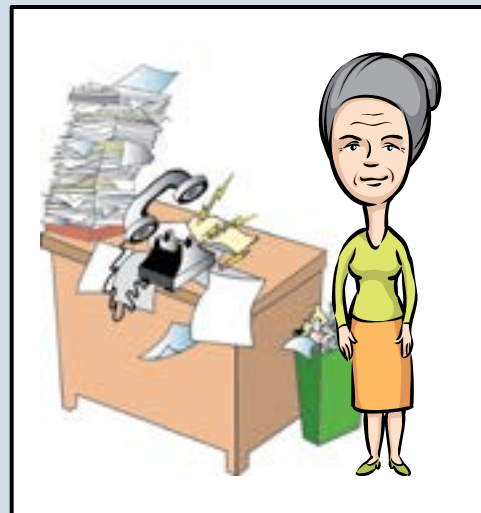
- **A no-fault system.** Every work-related injury is covered regardless of who is to blame – the worker, employer or co-worker.
- **All employers contribute to the system based on industry groupings.** This provides a ready fund to care for injured workers and removes the risk of bankruptcy for employers.
- **The system is fully funded.** There is always enough money to meet the current and future costs of work injuries.
- **The Board has exclusive jurisdiction.** Each claim is considered on its individual merits so benefits can be provided promptly without the need to sue for damages.
- **An independent board.** The system has an independent board to fairly serve and respond to the needs of workers and employers.

These principles are sometimes called the *historic compromise* between workers and employers: workers waive their right to sue in exchange for guaranteed and reasonable benefits; employers assume all costs for the system in exchange for protection from legal action.

When Gil first started Gil's Gears, he and his wife, Nora, managed the small business together. Gil worked as a welder and machinist, and continued to hire staff as the business grew. Nora managed the daily office tasks, payroll and bookkeeping (including paying taxes, insurance and WCB premiums on time). Their two sons, Mike and Rick, worked on weekends and after school when the shop needed extra hands.

Gil and Nora knew that Saskatchewan businesses have to register with the WCB and pay annual premiums. They didn't know about the Meredith Principles, but they did understand it was important to protect themselves and their workers by paying the WCB premiums.

As Gil's Gears grew over the years, more manufacturing as well as shipping and receiving staff were hired. The company also hired an accountant, Marian. Marian has been with Gil's Gears for 31 years and will be retiring soon.



## 1.2 How to register your business

Under *The Workers' Compensation Act, 2013* (the Act), most employers doing business in Saskatchewan are required to register with the WCB.

### Do you have to register with the WCB?

Generally, you must register if your firm:

- Works in an industry that is defined as mandatory under the Act.
- Employs and pays workers on a regular, casual or contract basis.
- Comes from another province or country and meets the requirements under Saskatchewan legislation.

To find out if you are required to register, or are eligible to register, email Employer Services at [employerservices@wcbask.com](mailto:employerservices@wcbask.com) or call 306.787.4370 or toll free 1.800.667.7590.

### If you don't register

It is against the law to avoid registering with the WCB. If you don't register and one of your workers is injured, you could be:

- Fined;
- Required to pay the total compensation costs of the injury; and
- Required to pay a minimum of three years in retroactive insurance premiums.

### How to register a business

Information you will need:

- Complete legal name of your business or, if you are registering under a partnership or proprietorship, the legal names of the partners.
- Directors' names if your business is incorporated.
- Physical address, mailing address and contact information.
- Federal business number.
- The start date of operations and start date of your first worker.
- An estimate of your payroll for workers and directors who report employment income on a Canada Revenue Agency T4 income tax slip.
- For the prior three years, the total gross payroll for workers (up to the maximum wage rate per annum), including directors who report employment income on a Canada Revenue Agency T4 income tax slip.
- A list of contractors you have paid in the previous three years for work done in Saskatchewan, including the type of work and contract amounts.

*Register online.* At [www.wcbask.com](http://www.wcbask.com), click Register Your Business. Read and accept the disclaimer, then complete and submit the registration form online. The online registration process should only take about 15 minutes.

You can also register by telephone. You can also email any questions. Contact Employer Services as above.

## 1.3 Online services

It's quick and convenient to set up a WCB Online Account using the WCB's secure Online Services. As a business owner, you may not be looking for information during typical business hours. So, once you have registered your firm with the WCB, open an online account to conduct transactions and view your account information at any time.

With an Online Services account, you can:

- request letters of good standing
- request clearances and use our Automated Clearance Verification (ACV)
- file your Employer's Payroll Statement
- revise your payroll estimate
- view claims cost information
- view the balance of your WCB account
- pay your premiums with a credit card
- manage your account information
- report an injury

Visit [www.wcbsask.com](http://www.wcbsask.com) for more information.

## 1.4 Your premiums

Once registered, you are charged annually for your workplace insurance coverage. Your premiums are based on each \$100 of your assessable payroll.  
e.g. firm rate x (total gross payroll and/or total contract amount/\$100) = premiums due

### Reporting your payroll

#### Assessable payroll

To determine your premiums, the WCB requires that you report your assessable payroll. Assessable payroll earnings are gross earnings – earnings before income tax, employment insurance, pension and other deductions. These earnings include regular wages and salaries, piecework fees, commissions, bonuses, other payments and taxable benefits. Refer to the WCB's Policy Manual for current assessable payroll reporting responsibilities. The Policy Manual is available at [www.wcbsask.com](http://www.wcbsask.com).

Effective Jan. 1, 2025, the definition of a worker has changed under the Act. Directors receiving wages reported on a T4 are no longer included in the definition of a worker. Because of this legislative change, the way you report worker wages on your EPS has changed. Any earnings for directors of a corporation should not be included as worker wages on your 2025 estimates of your EPS. Total assessable wages should not include wages of directors who receive employment income on T4 slips, as these individuals are no longer considered workers.

#### Maximum assessable earnings

The WCB provides benefits to a maximum insurable wage. Report each worker's gross earnings only to the current insurable maximum set by WCB legislation. To check what the maximum insurable wage is for the current year, visit [www.wcbsask.com](http://www.wcbsask.com), email [employerservices@wcbsask.com](mailto:employerservices@wcbsask.com), or call Employer Services at 306.787.4370 or 1.800.667.7590.

#### Employer's Payroll Statement (EPS)

If you've registered with the WCB, you'll receive an **Employer's Payroll Statement (EPS)** to be completed and returned to the WCB by Feb. 28 each year.

The WCB will use the following to assess your premiums:

- Your actual gross payroll for the previous year\*, and;
- A payroll estimate for the current year\*;
- A list of all the contractors and subcontractors you hired during the previous year.

*\*The payroll figures for the previous and current year should be reported up to the maximum*

**Complete and  
return your EPS  
by Feb. 28.**

*insurable wage per worker regardless of age for each year.*

### Penalties

If you file your **EPS** after the Feb. 28 deadline, you will be charged a penalty based on your premium. You can also be fined or charged additional penalties until the WCB receives your **EPS**.

If you don't file an **EPS**, the WCB will estimate your payroll and premiums. Our estimate will stand until you provide your actual payroll. If the estimate of your premiums is lower than your actual premiums, you're responsible for the difference. If at any time during the year you decide that your payroll estimate is too low or too high, you can contact the WCB to change that estimate and avoid a penalty.

Your records can be audited.

The WCB has a legal right to ask for your employer records for audit purposes. This information is held in the strictest confidence.

You could be fined if:

- you don't keep proper records
- you give untrue or inaccurate payroll statements
- you refuse to let the WCB look at your books and accounts

### Premiums

#### Industry classification

The WCB divides employers into broad industry classifications. Each industry class is divided into sub-sections called rate codes. The WCB assigns a rate code to all registered firms. Employers in an industry with similar operations, hazards or injury experience are assigned the same rate code.

Gil's Gears is in Class M for manufacturing and processing. It is in rate code M92 – machine shops, manufacturing, and the company's subcode is 01 for blacksmith and machine shops, so Gil's Gears is classified in M9201.

#### Premium rate

All employers in the same rate code pay the same base industry premium rate – an amount for each \$100 of payroll. Industry premium rates are based on the claims history of all employers in the rate code.

### Experience Rating Program (ERP)

The Experience Rating Program (ERP) provides incentive that positively influences injury prevention and safety in the workplace. The program adjusts your premium rate to reflect your company's claims history. You may receive a discount for a good claims record or be surcharged for a poor claims record.

Employers in the Experience Rating Program participate in either the Standard or Advanced Program based on their premiums paid over a three-year period.

- Employers who have paid premiums of less than \$21,000 over three years participate in the Standard Program.
- Employers with \$21,000 or more in premiums over three years participate in the Advanced Program.

You will receive notice of both your premium rate and any discount or surcharge at the end of the year, so you can see how your claims experience affects your premiums. For more information on the Experience Rating Program, visit [www.wcbsask.com](http://www.wcbsask.com).

**This formula determines how much you pay:**

$$\left[ \begin{array}{l} \text{industry base} \\ \text{premium rate} \end{array} \right] + \left[ \begin{array}{l} \text{experience rating} \\ \text{(surcharge or discount)} \end{array} \right] \times \frac{\text{assessable payroll}}{100} = \text{premium}$$

### How to pay your premiums

The WCB sends you a Statement of Account indicating the premium amount and due date(s) for your premiums.

Annual premiums can be paid in two installments on April 1 and on Sept. 1 of the same year. If your payment is late, you'll be charged interest at the Bank of Canada rate as of Oct. 31 of the previous year, plus six per cent.

#### Payment options

You can pay your premiums using one of the following methods:

*Online at [www.wcbsask.com](http://www.wcbsask.com)*

Through the Employers tab, or log in with your WCB Online Account. Be ready with your:

- WCB firm number
- WCB firm name
- payment amount (minimum \$5 and maximum \$5,000)
- credit card number

*Through your financial institution*

Via your financial institution's online or telephone banking service.

*By phone*

Call Employer Services at 306.787.4370 or toll free 1.800.667.7590 to pay by Visa™, MasterCard™ or American Express®.

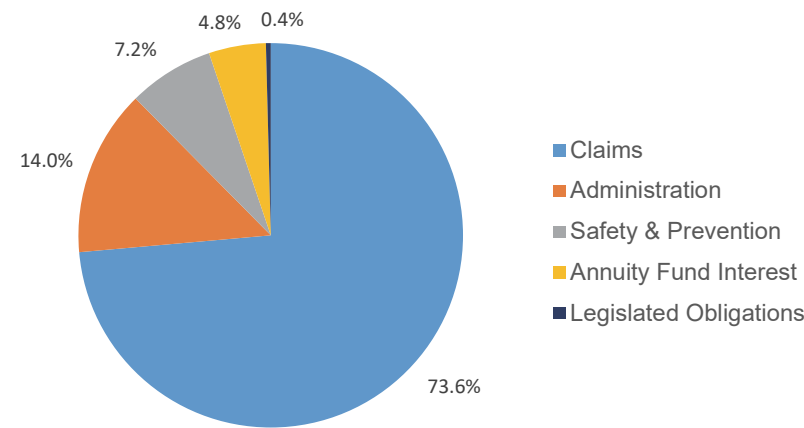
**By debit card**

Visit our offices in Regina at 200-1881 Scarth Street, or Saskatoon at 115 24<sup>th</sup> Street East.

**By mail**

Send a cheque payable to:  
Saskatchewan Workers' Compensation Board  
Box 4556  
Regina, SK S4P 3Y3

**Where do your premiums go?**



**How to reduce your premiums**

**Prevent injuries**

Preventing work injuries is the most effective way to reduce your premium costs. Injury prevention contributes to a better experience rating for your firm and a lower industry rate.

**Return injured workers to work**

Studies show that injured workers recover quicker and more completely the sooner they are able to return to work safely. Modifying job duties will allow an injured worker to return to work safely while they recover. This also reduces the overall claims costs of that injury.



**1.5 Coverage**

**Automatic coverage**

Workers' compensation protects both employers and workers from the results of workplace injuries. Regardless of who is responsible for a workplace injury, the worker receives benefits and the employer is protected against lawsuits.

**Who is automatically covered by workers' compensation?**

- All workers in mandatory industries are covered, no matter how old they are.

**Who is not automatically covered?**

- Firms or persons involved in industries listed in *The Workers' Compensation Act Miscellaneous Regulations* or Section 3 of the Act.
- Directors of an incorporated company regardless of whether they report employment income on a T4 slip.
- Owners of a sole proprietorship or partnership and their spouse.

Those who are not covered automatically may be able to apply for personal or voluntary coverage. Email Employer Services at [employerservices@wcbask.com](mailto:employerservices@wcbask.com) or call 306.787.4370 or toll free 1.800.667.7590.

**Optional personal coverage**

As an employer or business (including proprietor and their spouse, partner and their spouse, a director), you are not personally covered if you're injured at work. However, you can protect yourself by purchasing optional personal coverage.

**Sole proprietorship or partnership**

As a sole proprietor or partner, you and your spouse can apply for optional personal coverage. All other workers are covered automatically, regardless of age, including other family members who are employed by and receive wages from the firm.

**Limited company**

Optional coverage is available to a director of a corporation.

Not all contractors are eligible for their own WCB coverage. Contact WCB Employer Services for more information.



Rebecca has been learning the business and office routine from Marian in preparation for Marian's upcoming retirement. Marian had paid the WCB statements at Gil's Gears since she started. Rebecca reviewed their old cost statements and visited the WCB website but she still had many questions for Mike and Rick: "What happens if a student worker is injured? Or Vincent the contractor? Or one of you?"



After she met with them, Mike and Rick had some questions for the WCB. They carried personal life insurance as business owners, but hadn't thought about what could happen to themselves or to Mike's son Chris in case of an injury. They learned that, as owners, they were **not** covered by the WCB. They decided to opt for personal coverage from the WCB and also consult their independent insurer for advice.

They also looked into their family members and learned that, because they paid the family members as salaried workers and reported them on payroll to the WCB, they received WCB coverage.

## Interprovincial coverage

### For workers going out-of-province

Depending upon the requirements of the province you will be working in, your Saskatchewan WCB insurance coverage may apply. You must contact the WCB Employer Services departments in those provinces to find out if you are required to register with them. For more detailed information, see our brochure *Coverage for Saskatchewan Employers Operating out of Province/Country*, at [www.wcbsask.com](http://www.wcbsask.com).

### For workers coming into Saskatchewan

If you're an employer from another province or country with workers doing work in Saskatchewan, contact Employer Services to find out if you are required to register with the Saskatchewan WCB (See our brochure *Coverage for Out-of-Province Employers Operating in Saskatchewan*, at [www.wcbsask.com](http://www.wcbsask.com)).

## Coverage for contract work

Injured workers can get benefits even if their employer hasn't registered with the WCB or has overdue premiums. Because the WCB accepts this liability, steps are taken to ensure that all employer accounts are current, especially in contract situations.

Contract situations involve:

**A principal** – the person or business that hires the contractor.

**A contractor or subcontractor** – the person or firm doing the work, or the person or business that gets the contract.

Anyone under contract to a principal is either a worker of that principal or an employer themselves if they also have workers. Anyone not registered as an employer with the WCB is considered a worker and the principal must report the cost of the labour portion of the contract. All contractors, whether registered with the WCB or not, must be reported. If the contractor is registered and in good standing, they will be removed from your WCB assessment.

If you hire a contractor or subcontractor, you are required by the Act to obtain a clearance on a contractor before making settlement to them.

### What is a letter of good standing?

A Letter of Good Standing is a letter requested before a contract begins and tells a principal if a contractor has a WCB account and if their status with us is in good standing. The letter is only valid for the day it is requested.

### What is a clearance?

A clearance is a letter from the WCB that gives a principal permission to pay a contractor for completed work, as of the date of the clearance. A clearance protects the principal from having to pay any overdue premiums the contractor owes to us.

When you get a clearance, you will see one of the following statuses:

- cleared – pay the contractor
- deemed – no account, considered your worker
- hold – wait for further information
- demand – pay the sum requested from the amount you owe the contractor

### Request a letter of good standing or a clearance:

- through a WCB Online Account – this gives you 24/7 access to the clearance process
- call Employer Services at 306.787.4370 or toll free 1.800.667.7590
- fax your request to 306.787.4205 or 1.877.220.1671

### Automatic clearance verification

You can also register for **Automatic Clearance Verification (ACV)** through a WCB Online Account. This system provides automatic email notification of any changes in the clearance status of any contractors and subcontractors you list.



## 1.6 Employer responsibilities

### Duty to report workplace injuries

You are required by law to report workplace injuries within five days of being made aware of them.

Failure to do so may result in fines or prosecution, or both. Filing an **Employer's Initial Report of Injury (E1)** is quick and easy online or by the WCB Teleservice.

Late reporting slows down the claims process. Prompt reporting helps your workers get the benefits they are entitled to and helps them get them back to work faster.

### Duty to co-operate in return to work

When required by the WCB, employers have a legal responsibility to co-operate in return-to-work efforts.

*The Workers' Compensation Act 2013*, Section 53 reads as follows:

"An employer shall co-operate with the board and the worker to achieve the early and safe return of an injured worker to his or her employment."

This could include making changes to the job, workstation or, in some cases, finding other temporary duties that allow injured workers to safely return to the workplace during their recovery. For more information on return to work, please see section 4.2.

### Duty to accommodate

Duty to accommodate is not a WCB regulation, but it is defined by case law and supported by human rights and the *Saskatchewan Employment Act*. Employers and unions must investigate and familiarize themselves with these obligations and, in circumstances where it applies, ensure they are in compliance with them.

### Provide a safe workplace

Provide a safe and healthy workplace. Set up safety and injury prevention programs.



## 1.7 WCB responsibilities and services

The WCB is responsible for providing you and your injured workers with the following services:

- Providing registered employers with workplace insurance coverage.
- Assessing fair premiums.
- Educating employers and workers about injury prevention through *WorkSafe Saskatchewan* and the WCB's Prevention department.
- Helping employers develop and implement safety and prevention programs.
- Determining and providing WCB benefits to injured workers.
- Providing case management services to facilitate health care and monitoring workers' recovery and return to work.
- Helping employers and workers develop and implement workplace return-to-work programs and individual return-to-work plans to accommodate injured workers, as required by law.
- Supporting research to prevent and reduce injuries and occupational diseases.

When a workplace injury happens, *The Workers' Compensation Act, 2013* protects both the injured worker and the employer.

## 1.8 Confidentiality

The WCB guards the confidentiality of information. WCB workers cannot give out any information unless authorized to do so. You can give permission to have information about your account released to a third party. The third party must agree to use the information only in the way you intend it to be used, to keep information secure and to not release the information to anyone.

The WCB is committed to improving health and safety in the workplace by working closely with the Ministry of Labour Relations and Workplace Safety (LRWS) through the WorkSafe partnership, as well as supporting initiatives of other various organizations, such as industry-based safety associations, and health and safety research organizations. The WCB may enter into written agreements to share injury statistics and claim information to facilitate improvements in workplace safety and injury prevention.

# REPORTING A CLAIM

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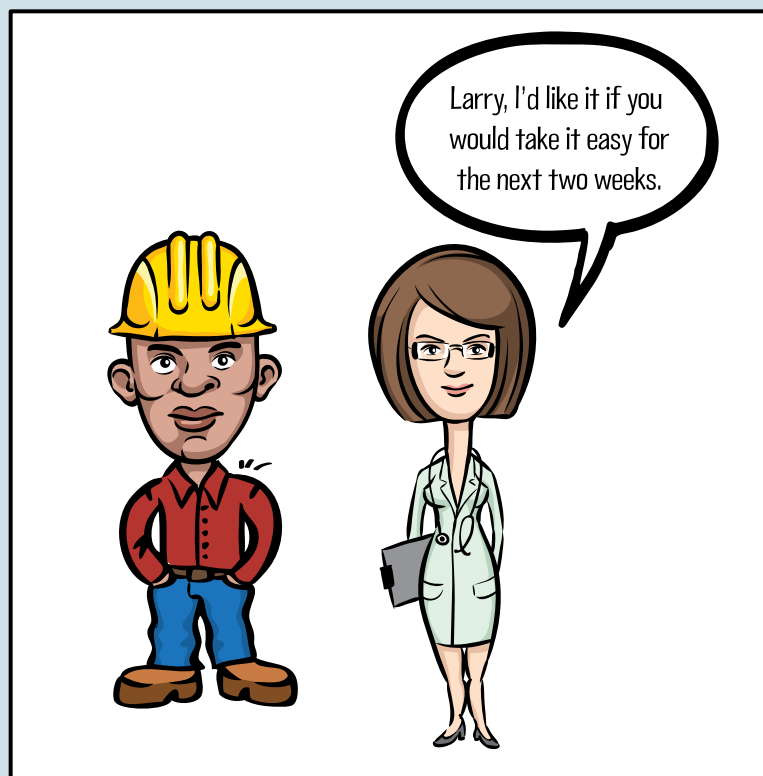
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## 2.1 The injury

Larry has worked at Gil's Gears for more than 16 years as a welder and machinist. Recently, Larry went to see his doctor for a checkup and mentioned his nagging shoulder pain. He didn't think anything of it and didn't complete any injury forms or inform Mike and Rick. It just never got better, and it started bothering him at home and while he worked.

The doctor examined Larry. She asked him many questions about his lifestyle and his daily tasks, including his job. The doctor told Larry that his nagging shoulder pain could be the result of a repetitive motion injury. The doctor had seen this before – it can develop from such things as years of grinding and welding. The doctor recommended time off work for two weeks to let the shoulder settle down and then she'd re-evaluate. The doctor thinks that if this is left untreated, Larry may need surgery.



The doctor completed a **Physician's Initial Report (PPI)** form to report Larry's work injury to the WCB.

Larry told his employers Mike and Rick that he is off work for two weeks – doctor's orders – to help his shoulder heal. He provided them with the doctor's note. Mike and Rick did not report the injury to the WCB. They assigned his work duties to other workers until Larry's return in a couple of weeks.

---

Two weeks after Larry's first doctor's appointment, the doctor re-evaluated and scheduled medical tests to confirm the severity of the shoulder injury. The tests included a magnetic resonance imaging (MRI) appointment. Larry had to travel to Saskatoon (more than two hours from home) for the MRI.

The MRI showed that Larry had seriously inflamed soft tissue around the shoulder joint. The doctor advised Larry to limit strenuous activities and referred him to a physical therapist.

In the meantime, the WCB received the doctor's letter about Larry's injury.



## 2.2 How to report a work injury to the WCB

Once you are aware of a work-related injury that requires medical attention, you as an employer must report it to the WCB within five days by submitting the **Employer's Initial Report of Injury (E1)** form. If you do not report within five days, you may be subject to a fine and/or penalty.

You should also make sure the worker submits a **Worker's Initial Report of Injury (W1)** form.

You are required to provide this form to any worker who is injured or who asks for it. You can get the forms online or from a WCB office.

There are several ways to report an injury:

### *Online*

Go to **www.wcbsask.com**. Click File a claim (injury incident form – E1) under Employers. Complete the report on screen and click Submit to send the report to the WCB automatically.

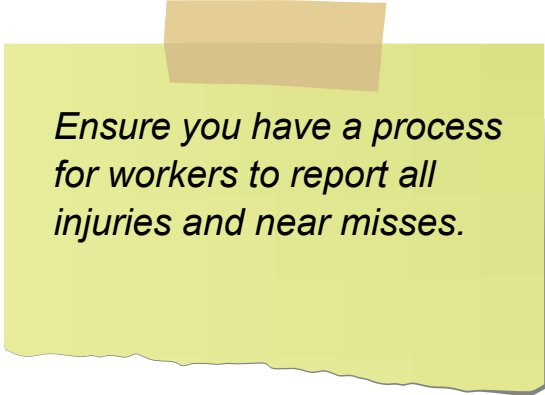
### *By phone*

Dial 1.800.667.7590. A WCB representative will fill out the **E1** form with you over the telephone.

### *By fax or mail*

Download a copy of the **E1** form from our website **www.wcbsask.com** (Employers tab – Employer Forms & Fact Sheets). Complete the form on screen or complete it by hand. You may also request an **E1** form from our office.

Use the fax number or mailing address on the form to send it in.



*Ensure you have a process for workers to report all injuries and near misses.*



## 2.3 What to do if there is a workplace incident

Provide first aid for any injured worker(s). Get medical attention for your injured worker and, if needed, take an ambulance or other transportation to the nearest appropriate medical facility (hospital, medical clinic, doctor's office, etc.).

Within five days of being aware of the incident, you must make a report to the WCB. This includes all incidents that require medical attention and fatalities. Failing to do so could result in a summary conviction, a requirement to pay an amount of compensation and medical costs paid for that injury, or a fine up to \$10,000.

Conduct an internal investigation as to the cause(s) and factors contributing to the incident and determine procedures or modifications to prevent similar incidents in the future. Keep accurate records of all incidents.

A work injury is an injury that:

- happens at work, on company property or while conducting company business
- needs medical attention
- may or may not need time away from work

### Is an occupational disease the same thing as a work injury?

When workers are unable to work because of illness or disease resulting from exposure to substances or conditions in the workplace, they may claim compensation for an occupational disease just as they would for other work injuries. The WCB covers both.

### Is a psychological injury the same thing as a work injury?

When workers suffer a psychological injury from being directly exposed to a traumatic event, or series of traumatic events, as part of or in the course of their employment, they may be eligible for compensation and medical treatment just as they would for other work injuries. It is presumed that the worker has sustained the psychological injury as a result of their work unless there is evidence to the contrary.

### What about a death at work?

When a worker dies at work, or is found dead in the workplace, in an area where the worker had a right to be in the course of his or her employment, it is presumed that the death was work-related unless it is proved otherwise. There will be an investigation by the Occupational Health and Safety Division of the Ministry of Labour Relations and Workplace Safety if a death occurs at the workplace.

### Why report work injuries?

You are required by law to report any injury that needs medical attention to the WCB within five days of being made aware of it.

By receiving your report quickly, the WCB can decide whether the injury is work-related and promptly provide any benefits to which the injured worker may be entitled. This minimizes the financial and physical impact of the injury on the worker and the family.

Obtaining your worker's medical restrictions and beginning a prompt return-to-work plan can also lessen the duration of your worker's injury and restore their abilities, which will help reduce the impact on your experience rating.

The WCB sent a letter to Mike and Rick notifying them that the WCB had received a letter from Larry's doctor and that Gil's Gears needs to complete the **Employer's Initial Report of Injury (E1)** form within five days of learning about the injury. The WCB letter told them that they must report all injuries. When they speak to their claims manager, she suggested they develop a process to ensure all injuries are promptly reported by the worker.

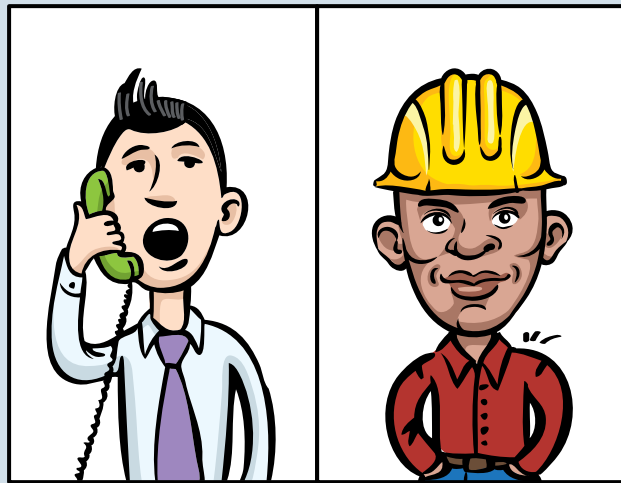
This was the first time Mike and Rick realized that Larry's sore shoulder is seen as a work-related injury.

Mike and Rick brought in another worker, Jack, their Production Manager, who is also co-chair of Gil's Gears' Occupational Health Committee (OHC). They wanted to know if Jack was aware of the injury. Jack said that Larry had mentioned his shoulder had been bothering him for a while, but he did not say that it was because of work. Like Larry, Jack didn't think that the shoulder strain was serious enough to worry about. On the advice of the WCB, Mike asked Jack to work on an injury reporting system.



Rick called Larry at home to let him know that Gil's Gears would be submitting an E1 form to the WCB and advised him to complete the **Worker's Initial Report of Injury (WI)**. Larry completed the form and submitted it to the WCB immediately.

Larry didn't know he had to complete a form, but was relieved to learn that his lost wages, medical expenses and travel (outside his home community and outside his normal work expenses) were covered by the WCB. He was worried that taking time off work would strain his financial situation at home; he wasn't sure yet if he had enough sick leave or if he would have to apply for Employment Insurance.



## 2.4 Managing an injury claim

When a claim is accepted, the WCB pays medical expenses related specifically to the work injury (which are **not** paid by Saskatchewan Health), loss of wages and other benefits.

The WCB also pays other benefits for permanent disabilities. If a worker suffers a work-related fatality, the worker's dependants may be eligible for benefits, allowances and other support. The WCB will provide an immediate lump sum to assist with expenses related to the death of the worker, such as a burial or funeral.

If you disagree with a WCB decision, you have the right to ask to have it reviewed.

### Claims with no time off work

Even if your worker doesn't take time off work, but requires medical attention because of the injury, he or she needs to report it to you and to the WCB.

You are required to send us an **Employer's Initial Report of Injury (E1)** form within five days of being aware of the injury. These reports authorize the WCB to pay any medical costs.

These reports are also important for you in tracking and preventing injuries in your workplace. It is important to track No Time Loss (NTL) claims.

### Claims with time off work

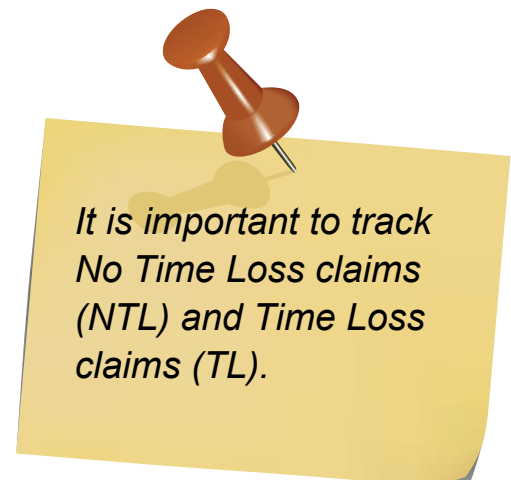
If your worker has to take time off work after the day of injury, this is called a Time Loss (TL) claim. The WCB will review the reports it gets from you, the worker and the health-care provider to confirm that the worker:

- Is an employee of your company;
- Was injured during the course of employment; and
- Can't work because of the injury.

The WCB will use this information to decide whether to accept the claim.

The WCB also needs you to confirm how much the worker was earning at the time of the injury.

If the worker can't go back to work because of the injury, the WCB may pay wages lost starting with the shift after the injury happened. Medical treatments, prescriptions and travel expenses may also be paid.



## **Case management services**

If the injury is more serious, or if recovery doesn't go as expected, the WCB assigns a case management team. Teams are located in both the Regina and Saskatoon offices.

Each team consists of:

- a team leader
- case managers
- case management support staff
- vocational rehabilitation specialists
- payment specialists
- access to medical staff who provide support when needed

A case manager and the other team members will work with you and your injured worker to co-ordinate medical and vocational services. This includes return-to-work (RTW) plans to help your worker get back to productive work as soon as it is medically safe.

The WCB expects the injured worker to work closely with the health-care provider and co-operate fully in treatment and rehabilitation. If the worker is unwilling, then it could result in a disruption of the worker's benefits.

## 2.5 Benefits for injured workers

The WCB provides benefits to injured workers based on the medical and vocational needs of their injury.

### Medical costs

The WCB pays for medical treatment, hospital care, prescriptions and medical supplies related to work injuries. Saskatchewan Health does not cover these costs for work injury claims.

### Travel expenses

After a workplace injury, a worker may incur additional expenses when travelling for medical appointments and treatment, vocational programs, or other appointments. The WCB will cover travel costs when the worker is required to travel outside their home community to attend WCB directed appointments.

### Wage-loss benefits

If an injured worker is only off work on the day of the injury, the WCB will only pay for medical treatment. If the injured worker misses work after the day of the injury, the WCB will pay benefits for lost wages based on medical confirmation of disability from work.

If you prefer, you can continue to pay your injured worker directly and request to have the WCB pay you. Wage-loss benefits are based on 90 per cent of net earnings (gross earnings minus probable deductions for Income Tax, Canada Pension and Employment Insurance). Insurable earnings can't be more than the maximum in effect on the date of the injury.

Benefits are adjusted each year based on changes in the Saskatchewan Consumer Price Index. The WCB will continue wage-loss benefits as long as the injury continues, but not after age 65. Some exceptions could apply.

Because wage-loss benefits are calculated on employment income, injured workers must tell their WCB case manager if they are missing work at more than one job due to the injury.

They also must tell you:

- When they return to work for you or start any job with a new employer.
- If they earn any other income while receiving WCB benefits.
- If they start a business.
- If they are already self-employed or involved in partnership activities.

### Permanent Functional Impairment benefits

If a worker is left with a permanent disability as a result of the work injury, he or she may be entitled to a one-time Permanent Functional Impairment (PFI) lump-sum payment.

## Independence allowance

Injured workers with a permanent functional impairment can get an annual independence allowance to help them live independently. This allowance is a percentage of the Permanent Functional Impairment Award.

## Loss of pension benefits

If a worker gets wage-loss benefits for more than 24 months in a row, the WCB helps the worker build retirement income by investing an amount equal to a percentage of the worker's benefits for as long as the worker is on compensation (which is referred to as an annuity).

## Workers 65 years or older

Workers 65 years of age or older on your payroll are covered and entitled to benefits if injured. Most benefits will continue as long as required by the injury, regardless of the worker's age. The only restriction is wage-loss benefits.

For workers 63 years or older, wage-loss benefits can only be paid for a maximum of two years from the date those wage-loss benefits begin, provided they are unable to earn all or part of their earnings because of their injury. Medical confirmation is required.

## Death benefits

In the event of a workplace fatality, a deceased worker's family may be entitled to benefits for a limited time. Benefits can include the following:

- *Burial expenses*: a lump-sum payment to the worker's estate to help pay for necessary expenses, such as burial or funeral costs.
- *Spousal benefits*: wage-loss benefits, vocational benefits, retirement benefits and educational allowances for dependent children.

A deceased worker's spouse may be entitled to the same employment services available to an injured worker. This includes:

- Vocational counselling.
- Career assessment and planning, including tuition, books, fees and other expenses while in an approved training program.

For more information on benefits, see the *Information for Workers Handbook* or visit the WCB website at [www.wcbsask.com](http://www.wcbsask.com).

# APPEALS

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### 3.1 The incident

Gil's Gears regularly hires Vincent, a contractor. He is self-employed, does not hire other workers and has elected not to take WCB optional personal coverage. Vincent is an engineer who installs equipment and trains staff on the design software that the company uses to custom build gears. Vincent was needed again, this time to help implement a new state-of-the-art precision cutter and train the staff to use it.

Three weeks into his contract, Vincent was calibrating the cutter. A moving part of the machine caught his forearm and broke a bone.

Fortunately, Vincent was not alone and his teammates stopped the machine and tended to Vincent immediately. Jack administered first aid, stabilized Vincent's arm and drove Vincent to the hospital.



Vincent came back to work the next afternoon to complete the **W1** form and inform Mike and Rick that he would be off work until he gets more information from his doctor regarding what he can and can't do while in a cast. Vincent submitted the **W1** form as a worker for Gil's Gears.

However, Gil's Gears recognized the work situation differently. They consider Vincent to be a business owner, not their

worker because, in this case, Vincent is self-employed and only on a term contract with the company. Jack completed an **E1** form to report the injury because it occurred at work. He stated on the **E1** that Vincent is on a contract and is not a worker of the company.

In Vincent's case, the WCB stated in a letter to Mike and Rick that Gil's Gears is considered Vincent's employer. The WCB said the company needed to submit information about Vincent's contract and to pay the premium on Vincent's earnings.

Mike and Rick disagreed with the WCB's decision. They intended to contact the WCB about how to proceed with an appeal. Mike and Rick do not consider Vincent a worker, and did not think his injuries should count against their experience rating. He is not their salaried worker, so they do not pay WCB premiums on his consulting fee.



## 3.2 If you disagree with a WCB decision

As an employer, you have the right to appeal decisions made on an injury claim or on your employer account. Communication should always be your first step. Contact the person who made the decision to provide any additional information and to be sure you understand why the decision was made.

If you still disagree with the decision, you have the right to appeal.

The appeal process must be made in writing and include:

- the decision you question
- the date the decision was made
- the WCB staff member who made the decision
- why you disagree with the decision
- how you think it should be resolved
- any other information to support your position

When you communicate with the WCB, always use your employer account number and the worker's claim number if available. Keep records of all communications.

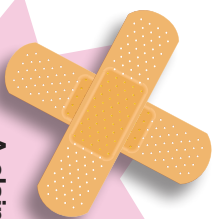
### Ask for information from the worker's claim file

If you dispute a WCB claims decision, and deem it necessary, you have the option to request information from your worker's file by completing and signing an **Employer Request for Information (EROI)** form. The WCB will let your worker know that you have requested information from the file. The worker has the right to object to the release of any sensitive or personal information not related to the decision under question. The worker has 15 days after being notified of the request to submit any objections. File information will then be released to you.

### Representative of your choice

You can authorize someone else to represent you or access information on your behalf. Complete and sign an **Authorization Letter of Representation (EREP)** form and mail or fax it to the WCB. Your representative can then request information from the claim file using the **Employer's Representative Request for Information (ERO2)** form.

# If you disagree with a WCB decision regarding:



A claim

## Review by appeals department

Appeals Department  
Saskatchewan WCB  
200 - 1881 Scarth St.  
Regina SK S4P 4L1  
Fax: 306.787.4311  
appeals@wcbask.com  
Online at wcbask.com

Your appeal is reviewed. You receive a written decision.

You agree with the decision.



You do **not** agree with the decision. You appeal to the **Board Appeal Tribunal**.

## What can you do?

Be sure you completely understand the decision before you appeal.

Request more information from employer services or claims.

You must provide your appeal information in writing. See page 41 for information that must be included in your appeal.

Assessment  
Experience rating  
Industry classification



## Review by assessment committee

Employer Services  
Saskatchewan WCB  
200 - 1881 Scarth St.  
Regina SK S4P 4L1  
Fax: 306.787.4205  
employerservices@wcbask.com

Your appeal is reviewed. You receive a written decision.

You agree with the decision.

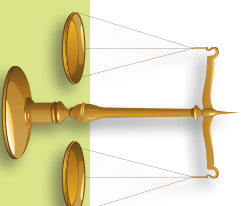


You do **not** agree with the decision. You appeal to the **Board Appeal Tribunal**.

## Board Appeal Tribunal

You must have a written decision from the appeals department **or** the assessment committee to proceed to the Board Appeal Tribunal.

Be sure you completely understand the decision before you appeal. You can ask for a personal meeting.



## Board Appeal Tribunal

Saskatchewan WCB  
200 - 1881 Scarth St.  
Regina SK S4P 4L1  
Fax: 306.787.0213  
boardappeal@wcbask.com  
Online at wcbask.com

Gil's Gears applied to the Assessment Committee with an appeal regarding the WCB's decision that Vincent is their worker. Mike and Rick do not think they should be required to pay the premium on Vincent's contract earnings.

However, the Assessment Committee agreed with the original decision. According to WCB policy, Vincent is considered a worker of Gil's Gears because he does not have his own WCB account and since he does not hire other workers, he is not required to do so. Therefore, Gil's Gears is considered the employer and Vincent is deemed its worker. As such, Gil's Gears is required to provide coverage for Vincent and pay the premium on his earnings.



Mike and Rick decided to accept the decision and not take the decision to a higher level of appeal, the Board Appeal Tribunal. Gil's Gears paid the premium and now are focusing on a return-to-work plan for Vincent. Vincent has a broken arm but is still capable of performing some of his regular duties.

An employer/worker relationship can exist where work is contracted to a sub-contractor who is not registered with the WCB and does not employ in its own right.

An independent worker is defined as someone who, regardless of whether the enterprise is a proprietorship, partnership or operating in some other form, supplies his or her own work under contract for services and does not employ others. Independent workers are not eligible for an account of their own if they are working under contract for services to only one principal company.

### 3.3 Fraud prevention

The premiums paid by Saskatchewan employers fund the WCB. Fraud or abuse of the compensation system can have long-term, adverse consequences on service delivery and premium rates.

Fraud is any dishonest action that results in a benefit to which a person is not entitled. Fraud and abuse hurt the employers who pay the rates and the workers who receive benefits. The WCB will not tolerate fraud or abuse from anyone. Anyone who intentionally abuses the compensation system may be charged with criminal fraud under Section 380 of the Criminal Code.

#### Examples of fraud

Employer – deliberately understating or falsifying statements of insurable earnings

Injured workers – working and/or earning an income while receiving WCB benefits

Health-care providers – billing for service(s) not provided

Vendors/suppliers – submitting inflated invoices

The WCB has investigators to pursue allegations of fraud and abuse. If you suspect that someone is committing fraud, you can notify the WCB anonymously in one of the following ways:

#### *Online*

Visit [www.wcbsask.com](http://www.wcbsask.com). Click on About WCB/Policy & Legislation/Fraud and Abuse.

#### *By phone*

Call our Fraud TIPS line at 1.877.595.2541 and indicate you are calling to report potential fraud.

#### *By fax*

Fax information in confidence to 306.787.0380 (Director, Internal Audit).

#### *By email*

Send a message to [fraud@wcbsask.com](mailto:fraud@wcbsask.com).

#### *By mail*

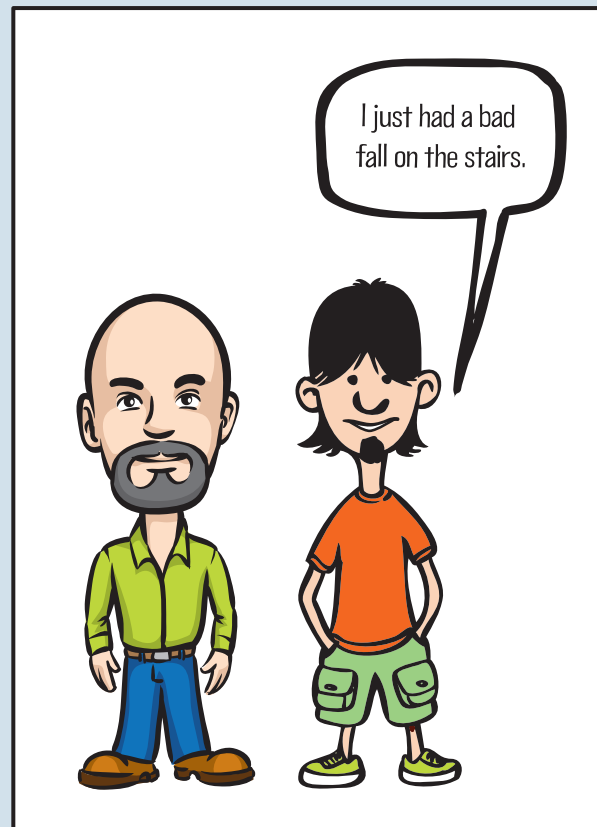
Attn: Director, Internal Audit  
Saskatchewan Workers' Compensation Board  
200 – 1881 Scarth Street  
Regina SK S4P 4L1

Mike and Rick support the university co-op programs and regularly hire business and engineering students for their work terms. Calvin is an engineering student on his second work-term assignment at Gil's Gears.

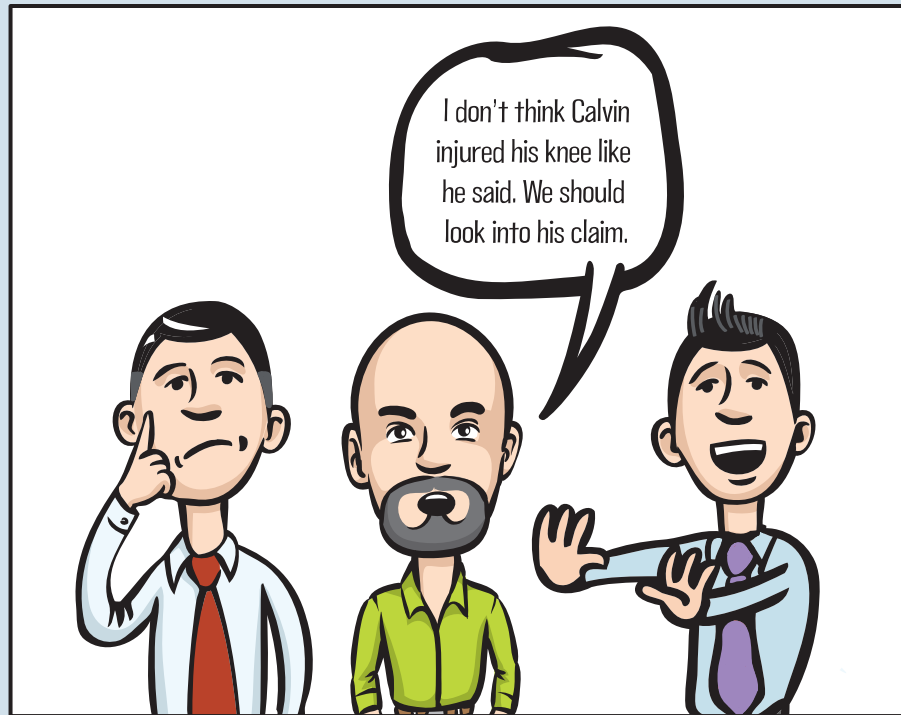
Early one morning, Calvin approached Jack and said he tripped, rolled his ankle and lost his balance as he was climbing up the stairs. He injured his knee when he banged it on the step. He said the toe of his boot must have clipped the step and sent him falling forward into the stairs.

Concerned and wanting to help, Jack asked to look at Calvin's knee. It was a little swollen and severely bruised. Jack got an icepack to help with the swelling. Because of the severe bruising on the knee and the shin, Jack suggested a trip to the hospital to make sure that nothing was cracked or broken. Calvin's family doctor works out of the local clinic, so Jack took him there. While they were waiting, Jack gave Calvin a copy of the **W1** form to complete. Jack completed the **E1** form and, on his way home, mailed both to the WCB. He left before Calvin saw the doctor.

Calvin called Mike and Rick the following day. He reported that he had an X-ray at the clinic and that he needs to stay off his leg for four weeks to avoid further injury to the knee, or else he'd need surgery at some future point to repair the damage.







Jack was uncertain about Calvin's injury and shared his doubts with Mike and Rick. Jack thought that the knee and shin looked too bruised for an injury that just happened because bruising takes some time to show.

Two weeks later, one of Calvin's co-workers, Steve, returned from vacation and learned about Calvin's knee injury. Steve told Jack that he is sure that Calvin did not injure his knee at work. Calvin and Steve play hockey in the same league. Their teams were playing the night before Calvin's work injury. Calvin took a nasty spill and a teammate took him to a clinic that same evening to get him checked out. He was given compresses and pain killers to help relieve the pain and swelling and advised to see his family doctor in the morning.

When they learned this, Mike and Rick immediately contacted their WCB claims manager to provide this new information.

Calvin's claims manager looked into the matter. This included speaking with Calvin, co-workers and friends who witnessed Calvin's crash into the boards at the hockey game. They confirmed the date and facts as Steve had reported. At the same time, the claims manager informed them of the WCB's Fraud TIPS hotline, available for anyone to anonymously contact should they ever suspect fraudulent behaviour on the part of an injured worker, or even an employer, in the future.



With further investigation, the WCB reversed its decision and Calvin was required to pay back to the WCB the money he received.

Mike and Rick ended Calvin's work term because he was dishonest.

### 3.4 Fair Practices Office

The Fair Practices Office (FPO) is like an ombudsman office and reports directly to the Board through the Chairperson. The FPO responds to questions and concerns about services provided by the WCB. Injured workers, employers and care providers can call the office with their concerns on a confidential basis. The role of the FPO is to listen to the customers' concerns, provide information on how the WCB system operates and work to resolve problems.

#### Issues the FPO can deal with:

- delays in decision-making, communication, payment, etc.
- concerns about written and verbal communication
- staff conduct
- implementation of Appeal and Board decisions
- payments of wage loss, medical or travel expenses, independence allowance, Permanent Functional Impairment (PFI) Awards, etc.
- vocational rehabilitation services
- employer classification, assessments, experience rating, etc.
- application of policy and procedure

#### Working with the FPO is not a formal appeal

The FPO:

- is not part of the WCB appeal process
- cannot investigate an issue that is already under appeal
- may be able to address the issues on an informal basis, without proceeding to an appeal
- can provide detailed information about possible solutions including the appeal process

Fair Practices Office

Phone: 306.787.8651

Toll free: 1.888.787.8651

Toll-free fax: 1.866.787.6751

Email: [fairpracticeoffice@wcb-sask.com](mailto:fairpracticeoffice@wcb-sask.com)

Online: [www.wcb-sask.com/about-wcb/who-we-are/fair-practices-office](http://www.wcb-sask.com/about-wcb/who-we-are/fair-practices-office)

# RETURN TO WORK (RTW)

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## 4.1 Health care and recovery

Everyone – you, your worker, the health-care provider and the WCB – has a role to play in a worker’s recovery and return to work.

### Primary treatment

Most injured workers need only primary-level care from a local health-care provider. The primary health-care provider decides what treatment the worker will get for the injury, reports the injury to the WCB and updates the WCB regularly on the worker’s progress.


The WCB can help the care provider by arranging assessments, specialist appointments, diagnostic tests, etc. If the worker has limitations because of the injury, the health-care provider can give the worker a list of these restrictions to give to you. You can then adjust that worker’s duties so they can return to alternate or modified work that is within those restrictions while they recover. Occasionally, permanent accommodation may be required.

The two injuries were taking their toll on the company. Mike and Rick felt they were spending too much time trying to deal with these injuries and claims properly. Rebecca received a WCB statement and the three of them realized how the claims related costs were adding up.



Because of his shoulder injury, Larry was off work for eight weeks. After the MRI results came back, his doctor prescribed physical therapy to begin immediately. The nearest clinic was over two hours away, so after one week of in-clinic teaching while Larry stayed in a hotel, the physical therapist gave Larry a series of exercises to do at home.

Vincent, on the other hand, received a cast for his broken forearm and he was advised he could still work, but with restricted duties. Once he has the cast removed, Vincent will also begin a physical therapy program. Vincent is still able to provide training and consultation services.



*Health-care providers have a responsibility to REPORT workplace injuries to the WCB.*

## Advanced assessment and treatment

Workers with serious injuries, or who don't recover as expected, may require advanced testing and treatment that is not always locally available. The worker might need to attend daily treatment at a facility in another community. The WCB will cover the cost of travel and other expenses if these costs are more than what the worker would normally pay to get to and from work.

The treatment centre will need information about the worker's regular job duties to design a treatment plan. In order to do this, you and your injured worker will be required to complete a **Job Information Worksheet (JIW)** form. The **JIW** is located at [www.wcbask.com](http://www.wcbask.com) – Employer Forms & Fact Sheets.

This form helps you describe the physical and mental requirements of the job. How much sitting, standing, lifting or reaching is required? How long are the regular shifts? This form will help the worker and the care provider create the right RTW plan for your worker, and help you with an overall picture of the position's tasks and where an accommodation can or should be made.

The worker is responsible for submitting the **JIW** to the WCB.

For more information about health care, recovery and return to work, view *The Right Care at the Right Time*, and *Recovery and Return to Work for Injured Workers* brochures on the WCB website under the Care Providers tab – Care Provider Forms & Fact Sheets.

## 4.2 Return to work (RTW)

RTW is an important aspect of recovery and claims management. Reconnecting injured workers back to their place of employment contributes to both their physical and psychological well-being.

Studies have shown that the longer injured workers are away from work, the less likely it is that they will ever return to productive employment. Workers who return to work as soon as possible often recover faster.

### Why is early RTW important?

By getting a worker back to work as soon as is medically safe, you reduce the physical and emotional impact for that worker and other workers. You also have a better chance of retaining that worker, which saves the cost of hiring and training a replacement.

The WCB encourages employers to be proactive and develop their own processes to identify safe and productive alternate or modified work for injured workers during their recovery. There are many benefits to getting a worker back to alternate or modified work as soon as it is medically safe to do so.

RTW:

- Promotes both the physical and psychological well-being of the injured worker.
- Reduces the potential for secondary conditions to develop.
- Maintains social bonds with co-workers and the occupational bond with the employer.
- Protects worker benefits.
- Minimizes the impact on productivity.
- Positively impacts WCB cost experience, which may impact your experience rating.

### After an injury – what should you do?

**INVESTIGATE.** Find out what happened. Why did this injury occur?

**CORRECT.** Implement safety improvements so another injury doesn't happen.

**DOCUMENT.** Complete all reports on the incident and submit all forms to the WCB.

**COMMUNICATE.** Keep talking with your injured worker.

- Maintain communication as he or she transitions back to work.
- Request your injured worker's medical restrictions as soon as possible so you can begin to discuss his/her RTW.

**ASSIGN.** Delegate appropriate tasks or duties based on the medical restrictions.

These steps could prevent another injury in the future and minimize the impact of the injury on your business, your injured worker, his or her family and co-workers.



## RTW programs – be prepared!

Setting up an RTW program before you have a Time Loss claim will benefit your company, regardless of the number of workers you have. Allow workers' input into developing your RTW program.

Document your RTW processes and communicate them to your workers.

Let them know that it is company policy to work with them to return to work in the event of an injury or work-related illness.

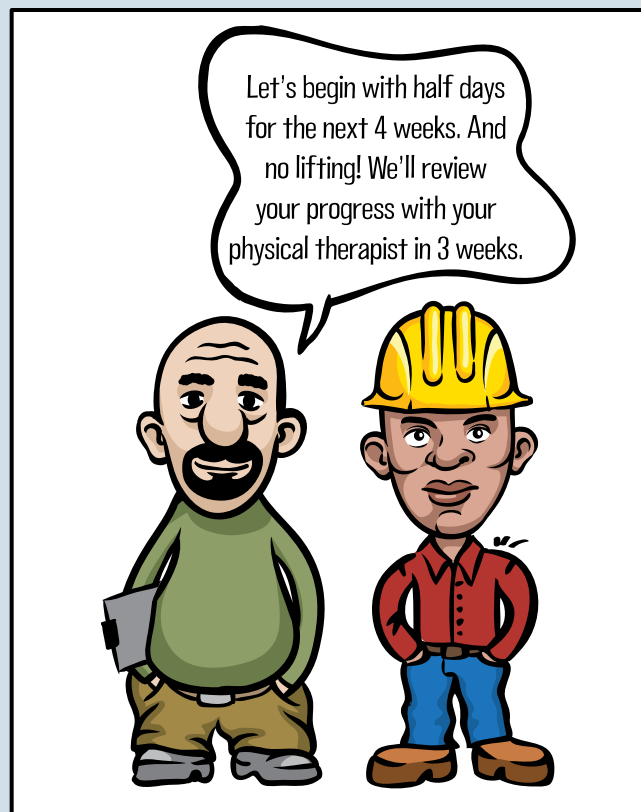
Tell them what they can expect from you and what you expect from them.

You may want to use the **JIW** form or an adapted **JIW** form to create task lists for each position.

In the event of an injury, this will serve you as a ready resource to adapt those tasks to any limitations the worker may have.

Larry was away from the shop floor for eight weeks, and he was still on restricted duty when he returned. The physical therapist wanted to monitor his shoulder and pain level as Larry returned to work and his regular duties.

Before Larry resumed work, he met with his supervisor to plan a return to work (RTW) schedule. Together, they reviewed his regular duties and the upcoming jobs. They assessed which duties he can perform immediately and which to add later. They shared the plan with the WCB and Larry's physical therapist. Larry's physical therapist continued to monitor his progress to adjust the timeline accordingly, in case he was able to begin adding some duties earlier than expected, or later, depending on his progress.

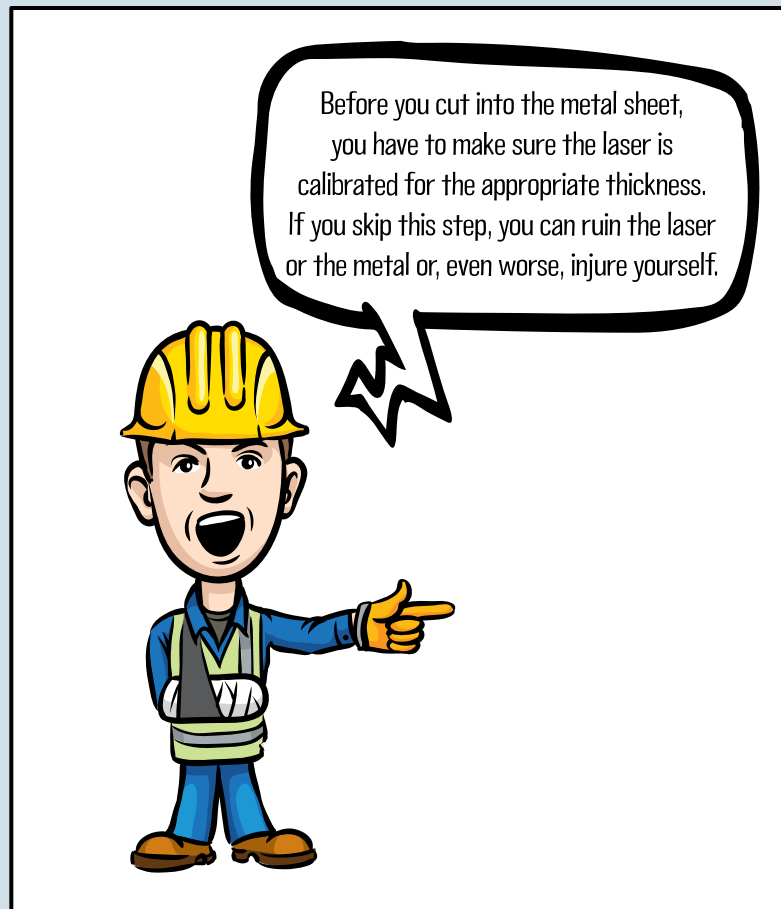


Larry began at half days with work that did not involve any above-the-shoulder reaching or extended forward reaching. His lifting was extremely limited. Larry's RTW plan was to gradually increase his activities as the shoulder healed and gained strength with therapy.

Larry, his supervisor and physical therapist agreed that Larry should be back to full-time hours and regular duties in an additional four weeks.

Vincent began his RTW with his cast but with restricted duties. Vincent was able to conduct most of the training tasks by talking and guiding the others. He was able to type and write with his non-casted hand.

After this experience, Mike and Rick began the work of creating RTW duty lists for other positions as well. They also created possible generic restricted duties that would be appropriate for all positions.



There are numerous websites to help you develop your return-to-work process. You can visit [www.worksafesask.ca](http://www.worksafesask.ca) and click on the Employers tab – Return to Work. Also, you can contact the WCB’s Employer Resource Centre at 1.833.961.0042 or email [ERC@wcbask.com](mailto:ERC@wcbask.com) for more information.

## Medical restrictions form

The purpose of a medical restrictions form is to provide an employer with an injured worker’s restrictions in order to identify safe and productive work as soon as possible.

A sample medical restrictions form can be found at [www.wcbask.com](http://www.wcbask.com) – Employer Forms & Fact Sheets.

If you do not receive any medical restrictions information, call the WCB who will provide them to you if the restrictions are on file.

## Individual RTW plans

Once you have your worker’s medical restrictions, you are able to proceed with identifying safe and appropriate work.


Developing an RTW plan for a specific worker requires your co-operation and that of the worker, health-care provider(s) and the WCB. Returning to work does not have to wait until the worker can do a full day at full capacity.

- Return the worker to the job with modified hours or duties to accommodate any limitations the worker may have because of the injury.
- Consider a different job in the same department.
- Consider a job in a different department or area of the workplace.
- Consider bundling a variety of suitable duties.

RTW work options must:

- Be productive (contribute to the objectives or operations of the company).
- Be within the medical capabilities of the injured worker.
- Be within the skills and abilities of the injured worker.
- Not endanger the health or safety of the injured worker or his/her co-workers.

To help the WCB monitor the worker’s return to work, you need to complete an **Employer’s Progress Report (E5)** form to confirm that the person is still off work, has returned or has an expected return date.



*Performance reviews and job descriptions are a good way to start a list of duties for an employee.*

## 4.3 Rehabilitation

### WCB-sponsored rehabilitation programs

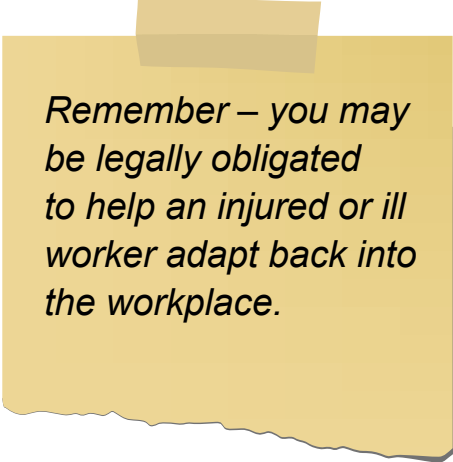
The WCB sponsors rehabilitation programs that require the collaborative effort of employers, workers and health-care providers. These programs can include work conditioning, occupational rehabilitation, interdisciplinary pain management and medical rehabilitation programs.

### Vocational rehabilitation services

If you are unable to develop an RTW plan for an injured worker, the WCB may refer you to a vocational rehabilitation consultant who may be able to help you and the worker find a solution. First, the consultant will work with you to bring the worker back into your workplace, either in the same job or in another.

If there are no viable options within your firm, the consultant will try to place the worker in another business or, if this is not possible, find appropriate education or training that will help the worker find new work.

For more information on RTW programs, rehabilitation programs and vocational rehabilitation services call 1.800.667.7590.



*Remember – you may be legally obligated to help an injured or ill worker adapt back into the workplace.*

# DEVELOPING A SAFETY PROGRAM

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## 5.1 Why should I have a health and safety program?

### Reason 1: People

The health and safety of your workers is the most important reason for developing prevention strategies. Injuries at work or at home affect the injured person, their family, their co-workers, your company and your community.

Mike and Rick realized the impact that injuries had on their workers and their business.

Productivity was down. Everyone was spending more time at work just to get things done. Some of the newer workers were concerned for their own safety because two injuries had happened within six months.

Some people felt that they were working harder to compensate for Larry and Vincent working on restricted duties and the work that Calvin would have been doing.

Veteran workers were trying to train new workers. The injuries were taking a toll on everyone.

### Reason 2: The bottom line

Prevention makes good business sense. When it comes to injury prevention, it's true that an ounce is worth a pound of cure.

Keep your workers where you need them. Injuries take skilled workers from the workplace.

Injuries cost you time and money and they can negatively affect workers' lives.

Rehiring and retraining to replace an injured worker, paying overtime to existing staff, the additional cost of an RTW program, and the potential increase in your WCB premiums all add up. Most employers don't even recognize many hidden costs. These all negatively affect your business.

*It's estimated that for every \$1 of the insured cost of an injury, the cost to the employer and the community is \$5 to \$50.*



During his time away, Larry's supervisor assigned his tasks to co-workers. Larry was an experienced employee. Even with the team covering for him, the work, the workers and the bottom line were still suffering. There were delays in production. Some workers needed more time to learn and complete specific tasks.

Gil's Gears began asking staff to work more overtime to try to meet production demands and stay on schedule. There were production delays, quality-control issues and tired workers. Jack became concerned that the heavy workloads would lead to more injuries, both at the workplace and at home. He had seen how, in other workplaces, one or two injuries could lead to poor morale, overwork and even more injuries. He noticed during his daily walk around the shop that many workers were getting distracted, complacent or forgetting safety on the job.

Jack thought it was time for some changes, and he took his concerns to Mike and Rick.



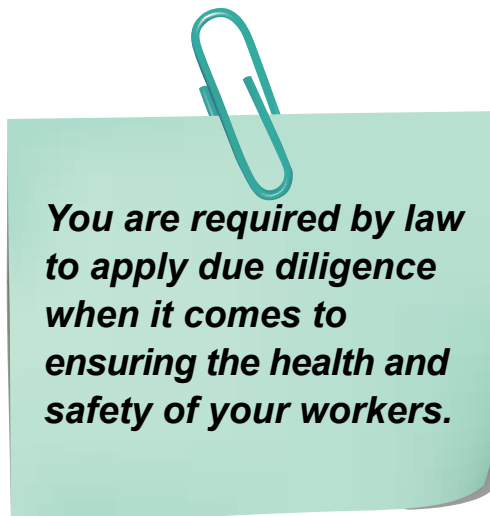


### **Reason 3: The legal requirement**

Every company should follow a documented safety program. Some companies are required to have one that fulfills prescribed elements. Find out what your company needs by referring to *The Saskatchewan Employment Act (SEA)* and *The Occupational Health and Safety Regulations, 2020* (the Regulations).

Section 3-20 of the Act. states that employers in prescribed industries need to provide an occupational health and safety program.

Section 3-11 of the Regulations prescribes the required elements of an occupational health and safety program for employers in the prescribed industries with 10 or more workers.



## **5.2 Benefits of a successful health and safety program**

A safety program is a systematic way to identify and control hazards in the workplace.

It defines an employer's requirements by establishing standard processes for inspections, hazard identification, safe work procedures, incident investigations, safety training and emergency response measures.

An effective program:

- Protects workers from injury.
- Protects workers from occupational disease.
- Reduces absenteeism and turnover.
- Ensures legislated occupational health and safety requirements are met.
- Promotes a positive health and safety culture and raises worker morale.
- Reduces WCB employer premiums.
- Reduces associated costs such as property damage, lost production hours, overtime costs, cost of hiring or retraining replacements.
- Protects an employer's reputation or 'brand.'

Keeping workers safe is both a legal and a moral responsibility, but effectively managing safety is just "good for business" for all employers regardless of size.

## 5.3 Forming an Occupational Health Committee (OHC)

### What is an OHC?

Creating an OHC is not only something that the WCB recommends; it is something your company could be required to do.

In the The Act and OHS regulations, you must establish an OHC in your workplace if you have

10 or more workers, whether the workers are full-time, part-time or both.

An OHC is a great way to foster communication between workers, supervisors and management about health and safety concerns and solutions.

To learn more about OHCs, go to [saskatchewan.ca](http://saskatchewan.ca) or attend one of the free training sessions from WorkSafe Saskatchewan at [www.worksafesask.ca/training](http://www.worksafesask.ca/training).

### Workers have the right to participate in decisions affecting health and safety at work

Workers can participate in the decisions regarding their workplace health and safety through their OHCs or worker health and safety representatives.

### What training do workers receive for the work of occupational health committees and as worker health and safety representatives?

Employers and workers who wish to serve on a committee must make sure committee co-chairs and health and safety representatives know their duties and functions and receive the necessary training.

Mike and Rick realized that investing in prevention was paying off.

As soon as possible, they sent the members of the OHC for committee training.

*Learn more about  
OHC training at  
[www.worksafesask.ca](http://www.worksafesask.ca)*

## 5.4 Who is responsible for safety?

**Everyone.** But those in the greatest degree of control have the greatest responsibility.



### Employers

Employers' responsibilities include the following:

- Provide a healthy and safe work environment.
- Establish and maintain an effective health and safety program.
- Make sure workers have the information, training, certification supervision and experience to do their job safely.
- Ensure that legal health and safety requirements are met.



### Supervisors

Supervisors' responsibilities include the following:


- Ensure workers under their supervision are sufficiently trained and supervised.
- Understand and ensure compliance with health and safety requirements.
- Coach workers to follow safe work procedures.
- Inspect work areas and correct unsafe acts or conditions.



### Workers

Workers' responsibilities include the following:

- Learn and follow safe work procedures.
- Protect their own health and safety and the health and safety of other workers.
- Participate in inspections and investigations where applicable.
- Use personal protective equipment where required.
- Know, understand and comply with health and safety legislation.



***Due diligence*** is a legal obligation requiring employers to take all reasonable precautions to prevent injuries or incidents in the workplace. This includes ensuring compliance with all relevant OHS rules and regulations and identifying and controlling workplace hazards.

## 5.5 What is a health and safety program?

- It is a systematic approach to actively manage safety in a workplace.
- Its goal is to prevent occupational injuries, illnesses and property damage.
- Its defined processes identify, assess and control hazards.

A health and safety program is a living and breathing action plan. On a regular basis it should be:

- Reviewed
- Re-evaluated
- Rewritten if necessary to remain current

### Job Safety Analysis (JSA)

A core element of a health and safety program is a job safety analysis. It has three basic steps:

1. Evaluate each task.
2. Identify any hazard.
3. Remove or control the hazard so that a worker can perform the task safely.

In many cases, this takes only a few minutes.

### Take prevention personally

If you want to change attitudes around workplace safety, start with yourself. Effective health and safety programs require leadership. Inspire your workers to take prevention seriously by making safe choices yourself.

### Empower your workers

Worker participation is vital to a safe workplace. To gain your workers' support, regularly communicate their rights to them. Show **and** tell them that they're an important part of the safety process.

Provide your workers with safety information and encourage them to bring their issues forward for discussion.



#### ***Did you know all workers have three rights?***

***The right to know*** about workplace hazards, how to identify them and how to protect themselves from injury.

***The right to participate*** in making occupational health and safety decisions through consultation with committees, representatives and other workers.

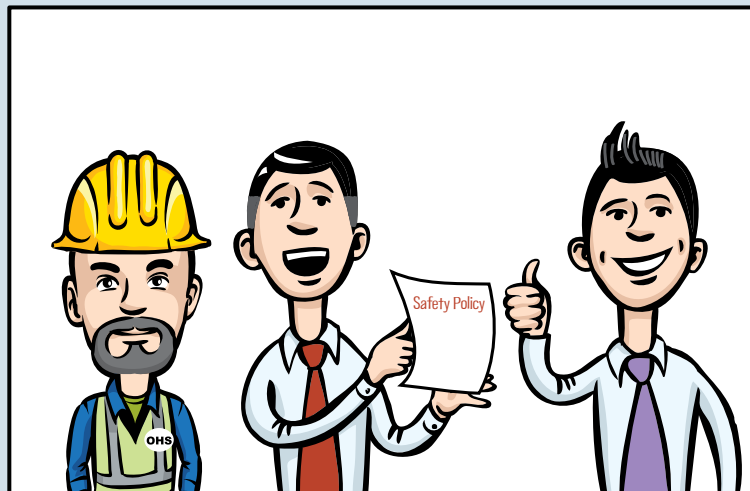
***The right to refuse*** work they believe to be unusually dangerous.

After the recent string of injuries at Gil's Gears, Mike, Rick and Jack met to evaluate their current health and safety program. Mike and Rick realized that the company had long grown past the need for just an OHC rep and needed to form a larger OHC. They asked Jack to organize one as soon as possible. The committee would review and improve safety at Gil's Gears, then meet regularly. Members would report to management their concerns, suggestions for improvements, etc.

Mike and Rick called a special staff meeting over lunch. Rick told the workers, "We've been through a lot in the past few months. We've received some big orders, and it's really putting pressure on our production schedule and shipping dates to get things out the door. Thanks to all of you for your hard work. We know this has created some risks for you, and we want to minimize those risks."

Mike then showed them a copy of the new safety policy that he, Rick and Jack had written. Mike and Rick signed it, and Rebecca posted it on the conference room wall.

Mike and Rick also announced Jack's new title as Health and Safety Co-ordinator.



Mike told the workers, "We're the experts on making gears, but Jack will be the leader in helping us build gears safely. I want all of you to go home every night the same way you arrived here – in one piece. I'm going to ask you to work with Jack, answer his questions, show him what you do and how you do it, and take his advice if he gives it."

## 5.6 Developing your company's health and safety program

### Create a safety policy

A safety policy is a key component of an effective health and safety program. It demonstrates senior management leadership support and elevates the importance of injury prevention within an organization. It is a company's formal commitment to safety and defines the overall values of its program.

It should outline the following elements:

**Philosophy:** What does your company believe about safety?

**Commitment:** What do you promise to do for your workers, clients, contractors and the environment?

**Objective:** What are the goals of the program?

**Responsibility:** What are you committing to do? What is going to be the responsibility of management? What are you expecting of the workers?

**When it is finished and signed, post it where everyone can see it so it stays top of mind!**

Here is an example of a policy that your business could use as a starting point to develop your own:

*This company is committed to a strong health and safety program that protects its staff, its property and the public from injuries, illnesses and incidents.*

*Workers at every level, including management, are responsible and accountable for the company's safety initiatives. Complete and active participation by everyone, every day, in every job, is necessary for the safety excellence the company expects.*

*Management will support the health and safety program and provide proper resources including safety equipment and training. We expect all workers to participate in the program, work safely and follow all safety rules and procedures.*

*An injury and incident-free workplace is our goal. Through continuous safety efforts, we can accomplish this.*

*Signed:* \_\_\_\_\_

*Date:* \_\_\_\_\_



***Important things to remember:***

*The President, CEO, owner or most senior manager onsite should sign your health and safety policy.*

*Place your health and safety policy at the beginning of your health and safety manual.*

*Post copies of your health and safety policy so it is available for all staff to read.*

*Review your health and safety policy annually.*

Jack called a staff meeting and explained what an occupational health committee is. He invited everyone to put his or her name forward or nominate a co-worker. Christopher, Mike's son and an engineer with the company, as well as Rebecca, the Human Resources and Office Manager, volunteered to be the employer reps for the committee. The others voted to let Larry and Tom, another machinist, become the founding OHC at Gil's Gears.

The committee began by reviewing past WCB claims to look at where their injuries were happening and what needed to change.

Over the next few weeks, Christopher, Rebecca, Larry and Tom talked to every worker on the floor to find out the workers' views on safety. They asked what needed improvement, what the main concerns were, and what could be changed or added to improve safety at Gil's Gears. They also asked if there have been any incidents, close calls or near misses that have not previously been reported. They asked the office staff the same questions.

The workers welcomed the opportunity to participate and provide input.





The workers gave many suggestions, including regular site and equipment inspections to ensure the people and equipment were working safely. They suggested regular equipment maintenance, checking that the first-aid kits were appropriately stocked, and employer-sponsored first-aid training and CPR certification.

Over the next few months, the OHC and the workers developed a set of standardized procedures with safety steps built into the tasks of every job description.

# HAZARD IDENTIFICATION AND CONTROL

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## 6.1 Hazard assessment and identification

Hazards exist from four areas in your company:

### People

- Improperly trained or poorly supervised
- Not paying attention to surroundings
- Not wearing the assigned or appropriate safety equipment
- Not following safe work practices
- Workplace stress, violence and/or bullying

### Equipment

- Poorly maintained, worn-out or uninspected equipment
- Unguarded equipment
- Using or wearing improper or worn-out equipment for the task

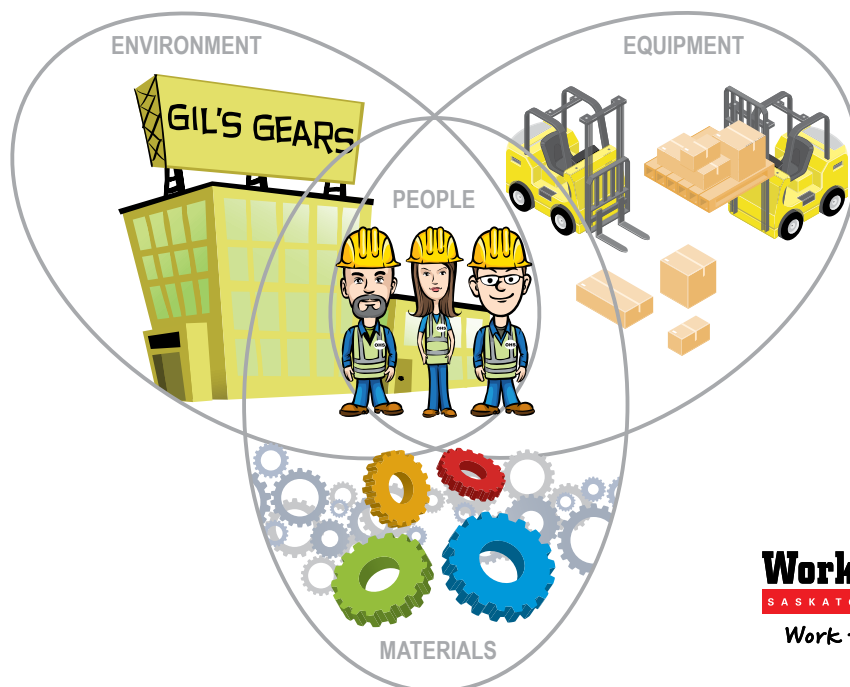
### Materials

- Materials that are flammable or require special storage and handling
- Chemicals that are volatile or dangerous when inhaled or in contact with skin

### Environment

- A wet floor
- Insufficient lighting
- Loud or constant sounds
- Inclement weather

A safety system is a process to help you identify seen and unseen hazards and risks in all four areas – risks from things that people are doing or **not** doing. It is also a way for them to report injuries and near misses, and for you to track them.



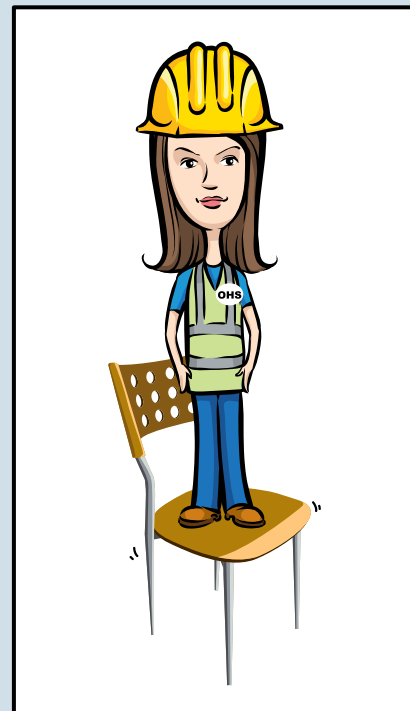
<b>Examples of Health and Safety Hazards</b>			
Chemical	Includes any form of chemical, such as compressed gases, solvents, lead and others.	Machine	Includes hazards from moving parts, like rotating shafts, belts and blades.
Physical	Includes noise, vibration, heat, cold and radiation.	Energy	Includes pneumatic or hydraulic pressure, steam, heat and electricity.
Ergonomic	Includes design of the workplace and jobs that involve repetition, force and posture.	Material handling	Includes moving, stacking and storing of all goods including dangerous goods.
Biological	Includes organisms or toxic substances produced by living things that can cause illnesses or diseases in humans, such as bacteria, viruses and fungi.	Safe work responsibilities	Includes not following safe work procedures currently implemented, or working in an environment that does not have safe work practices in place or doesn't enforce them.
Psychosocial	Includes stress and any form of violence, harassment or bullying.	Tools	Includes selecting the right tools for the job, training on the tools and ongoing maintenance.

## Risk Matrix ... what is the chance it will happen?

The risk matrix determines the likelihood something **will** happen and the impact if the incident occurs.

Likelihood ↑	Very likely	<b>Medium 2</b>	<b>High 3</b>	<b>Extreme 5</b>
	Likely	<b>Low 1</b>	<b>Medium 2</b>	<b>High 3</b>
	Unlikely	<b>Low 1</b>	<b>Low 1</b>	<b>Medium 2</b>
	<b>What is the chance it will happen?</b>	<b>Minor</b>	<b>Moderate</b>	<b>Major</b>
		↓ Impact →		

During their OHC training, Rebecca and Jack learned how to use the risk matrix. They decided to apply it to one of Rebecca's common tasks. Quite frequently, Rebecca uses a chair from the break room on a concrete surface to reach all of the office supplies from a high shelf. They determined that the risk is high she will fall. She does the task weekly. The chair is not stable, so there is also a medium to high likelihood a fall could occur. They also determined that if she fell, the impact would be high: she could receive a long-term or permanent injury. To eliminate the risk, Jack and Rebecca completed an urgent purchase request for a proper step stool for the supply room.



## 6.2 Hazard control

Once you have identified tasks and their hazards, you can set them into this matrix. Tasks with high likelihood/high impact are high risk and need immediate attention.

The next step is to develop and implement hazard controls. How you control a hazard depends on the circumstances. Consider the seriousness of the risk and then identify what controls are reasonable and practical in the circumstances.

### Ways to deal with hazards

#### 1. Elimination

Eliminate the workplace conditions, equipment, chemical, act or practice that is causing the hazard. Elimination is the best method of control, if possible.

- Replace a toxic substance with a non-toxic substance.
- Replace broken tools.
- Require workers wear personal protective equipment such as fall protection.

#### 2. Substitution

Substitution is the process of replacing a hazard with a less hazardous method, equipment, chemical or condition.

- Replace a toxic substance with a less toxic substance.
- Provide a stepladder for someone who stands on a chair to retrieve items from a shelf.

#### 3. Engineering

Engineer ways to eliminate or contain hazards.

- Add ventilation to remove toxic fumes.
- Install adjustable-height ergonomic surfaces to eliminate strain from repetitive movements.
- Automate a task.
- Provide lifting apparatus to reduce heavy manual tasks.

#### 4. Administration

Create administrative policies and procedures that reduce exposure to hazards.

- Create specific job procedures for operating equipment.
- Set limits for workers – such as how long they can be in a cold or noisy environment, how much weight they can lift or how much time they would need to do heavy manual tasks.

#### 5. Personal protective equipment (PPE)

This is your final approach to reducing hazards. Personal protective equipment is your last line of defence.

- Personal protective equipment includes items such as safety glasses, steel-toed boots, ear plugs, work gloves and hard hats.

More than one hazard control could be necessary to keep your workers safe, such as providing a less noisy machine (substitution), setting a time limit on how long a worker can be exposed to the noise (administration), or providing ear plugs and ear muffs (PPE).

## 6.3 Inspections

An internal safety inspection identifies and controls hazards in the workplace before injuries, illnesses and incidents occur.

Examine both workplace activities (how work is being completed) and workplace conditions (the environment in which work is being conducted).

Identify situations with the potential to cause damage and/or injury and take corrective measures. Identify any inspections in your operations that are required under OHS legislation.



### There are two main types of internal inspections:

#### Informal inspections

Informal inspections involve the regular monitoring of workplace activities. Often a problem can be resolved by discussing an unsafe act with your worker or by correcting the unsafe condition(s). Your supervisors should be continually involved in this type of inspection process.

#### Planned (formal) inspections

Planned inspections are structured events conducted by managers, supervisors or an inspection team made up of managers, supervisors and workers. Conduct these inspections on a regular basis (e.g., weekly, monthly, bi-monthly, quarterly).

Assign a priority level to hazards you observe based on your risk matrix.

- Extreme and high – require immediate action
- Medium – requires short- and medium-term action
- Low – requires long-term action or could be dealt with quickly in the short term

Inspection reports are official documents. Keep them on file for future reference.

Inspections can take many forms depending on your business or industry. Some are required by law.

- With each shift, users or operators should conduct pre-use inspections (e.g., forklift or fall arrest equipment inspections).
- Specialists and/or maintenance staff should conduct critical parts inspections on equipment such as cranes.
- OHC inspections – two or more committee members, including at least one worker rep conduct the inspection.
- Facilities inspection – senior management conducts inspection.

*The best checklist for your workplace is one developed for your specific needs.*



## Why are workplace inspections important?

An inspection shouldn't be done just because there is an incident. Regular inspections prevent incidents. Inspections identify substandard conditions or practices before they cause an injury or equipment damage.

Regular workplace inspections:

- Help prevent injuries and illnesses.
- Identify and record hazards.
- Help plan, report and monitor progress of the safety program.

Inspections are important because they provide an opportunity to:

- Listen to the concerns of workers and supervisors.
- Gain further understanding of jobs and tasks.
- Identify existing and potential hazards.
- Determine underlying causes of hazards.
- Monitor hazard controls (personal protective equipment, engineering controls, policies, procedures).
- Recommend and implement corrective action.

## Who should do an inspection?

Daily or shift inspections are a routine part of a prevention plan. Train operators to do their own pre-use inspections before each shift. Maintenance staff or specialists should conduct critical-parts inspections.

Health and safety committee members are the obvious choice to carry out formal inspections, especially if they have received training or certification.

Other criteria for selecting the inspection team are:

- Knowledge of regulations and procedures
- Knowledge of potential hazards, and
- Experience with work procedures involved.

You may wish to call upon special resources such as engineers, maintenance personnel, occupational hygienists, health and safety professionals, supervisors or managers to be a part of the inspection team. These experts may be able to help with certain aspects of an inspection, specific situations, or to help explain equipment or processes.

## What should the final report have in it?

1. Be sure to enter the department or area inspected, the date and the inspection team's names and titles on top of the page.
2. To make a report, first copy all unfinished items from the previous report on the new report.
3. Write down any observed unsafe condition and recommended action. Number them consecutively.
4. State exactly what was detected and accurately identify its location. For example, instead of stating "machine unguarded", state "guard missing on upper pulley #6 lathe in North Building".
5. Assign a priority level to the hazards observed based on your risk matrix to indicate the urgency of the corrective action required. What are your action plans for the short, medium and long term?

*On the next page is a sample Department Inspection Report that your business can use, or you can develop your own.*







## 6.4 Investigation

### Incident investigations

The purpose of an incident or near-miss investigation is to determine the root cause of an incident and find a way to correct or prevent it. All incidents, even minor ones, should be investigated.

Find out:

- What were the immediate causes of the incident?
- What was the root cause(s) of the incident?

Follow these steps when conducting incident investigations:

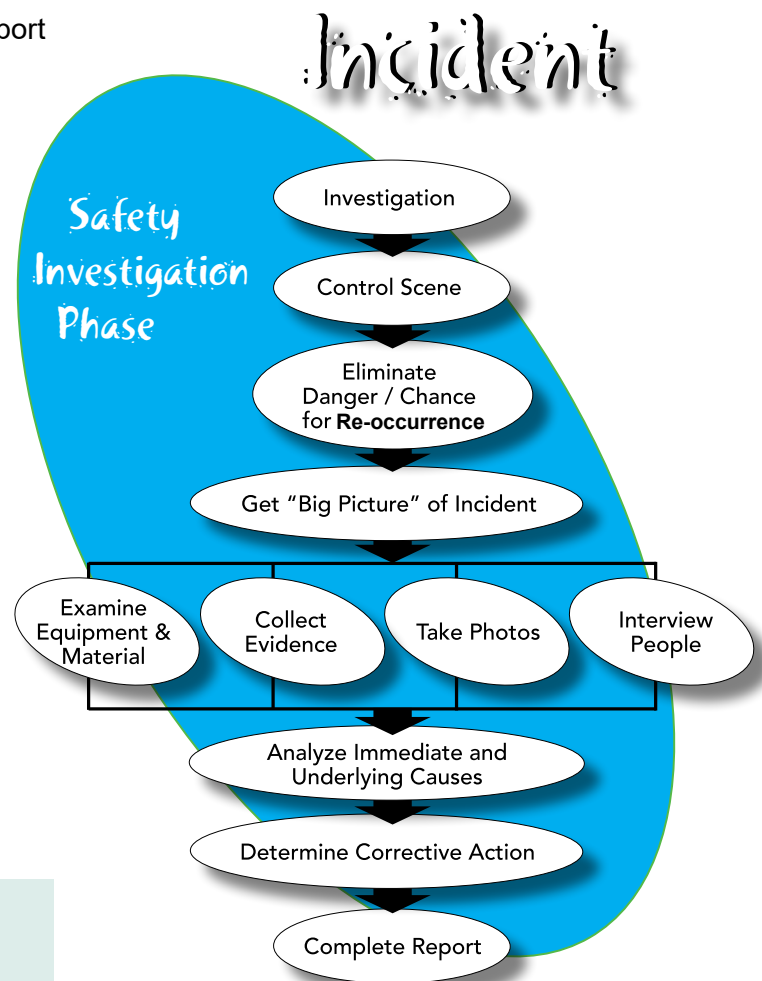
1. Take control of the scene
2. Ensure that no further injury or damage occurs
3. Investigate the incident
4. Complete an incident investigation report

The key to a good investigation is asking the right questions. Watch out for conclusions or phrases like:

- *Worker was not paying attention*
- *Worker should have known better*
- *Accidents happen*
- *It was just an accident*

As per Section 3-18 of the Regulations, you are **legally required to conduct an investigation** if a worker requires hospitalization for more than 24 hours, or if a worker is involved in an incident that causes or may cause serious bodily injury or death.

*On the next page is a sample Incident Investigation Report that your business can use, or you can develop your own.*





## INCIDENT INVESTIGATION REPORT

<b>Date of Incident:</b>	<b>Time of Incident:</b>	<b>Class / Dept:</b>	<b>Location of Incident:</b>
<b>Type of Incident: (Check <input checked="" type="checkbox"/> all that apply):</b> <input type="checkbox"/> Near Miss <span style="margin-left: 100px;"><input type="checkbox"/> Medical Aid Injury</span> <span style="margin-left: 50px;"><input type="checkbox"/> First Aid Injury</span> <span style="margin-left: 50px;"><input type="checkbox"/> Property/Equipment Damage</span> <input type="checkbox"/> Dangerous Occurrence <span style="margin-left: 100px;"><input type="checkbox"/> Serious Incident</span> <span style="margin-left: 50px;"><input type="checkbox"/> Fatality</span> <small>Section 2 of the Regulations and/or Section 7 of the Regulations <span style="margin-left: 100px;">Section 2 of the Regulations and/or Section 7 of the Regulations</span> <span style="margin-left: 50px;">Section 2.19 of the Regulations</span></small>			
<b>Name(s) of Deceased or Injured Worker:</b>			
<b>Injury Details (if Applicable):</b>			
<b>Description of Events (Describe in detail and list sequence of events. attach additional paper if required):</b>			
<b>Date Incident Reported to LRWS (if Applicable):</b> <small>Section 2-2 of the Regulations, Section 2-3 of the Regulations</small>		<b>Date Incident Investigation Report Sent to LRWS (if Applicable):</b> <small>Section 3-18 of the Regulations, Section 3-20 of the Regulations</small>	
<b>Investigation Completed By: (Check <input checked="" type="checkbox"/> all that apply)</b> <input type="checkbox"/> Supervisor <span style="margin-left: 100px;"><input type="checkbox"/> OHC Co-Chairs</span> <span style="margin-left: 100px;"><input type="checkbox"/> Other (Specify)</span>			
<b>Incident Investigation Results (Attach additional paper if required).</b>			
<b>Direct Cause Of Incident (What happened immediately before the incident and directly caused the incident)</b>			<b>Degree of Risk</b>
<b>Indirect Cause(s) Of Incident (Substantial acts and conditions that set the stage for the incident)</b>			<b>Degree of Risk</b>
<b>Root Cause(s) Of Incident (The underlying problems that allowed substantial acts and conditions to exist)</b>			<b>Degree of Risk</b>
<b>NOTE: If being sent to LRWS, attach copies of graphics, photographs or other evidence</b>			
<b>Corrective Actions Taken To Immediately Protect The Health And Safety Of Workers</b>		<b>Completion Target Date</b>	<b>Date Completed</b>
<b>Corrective Actions Taken To Prevent The Recurrence Of Incident</b>		<b>Completion Target Date</b>	<b>Date Completed</b>

Investigator Signature \_\_\_\_\_

CEIS/Supervisor/Manager Signature \_\_\_\_\_

## Safety Records

These are basic reports you should maintain to monitor and evaluate that your safety efforts are working. Keep these reports on file:

- Inspections reports
- Incident investigation reports (injuries and near misses)
- First-aid logs
- OHC meeting minutes and committee member list
- Training records for all workers.

## What else can you do to help?

Communicate regularly with your staff to reinforce the importance of working safely and ensure they have the information, tools, equipment and PPE they need to work safely.

- Stop unsafe work and positively recognize and reinforce safe work habits.
- Make safety a regular topic at staff meetings.
- Have short tailgate or toolbox talk meetings. These are 5-15 minute onsite meetings to prepare workers to do the job safely.



*Remember to refer to the legal requirements for your industry when you are completing an Incident Investigation Report.*

## Safety Measurement

Develop, maintain and review safety statistics to help evaluate whether your safety efforts are working.

Track both leading and lagging indicators.

For example:

- Leading Indicators: number of hazards reported, number of safety talks conducted, number of JSAs completed, number of equipment/vehicle inspections completed, etc.
- Lagging Indicators: number of injuries, number of near misses, number of first aids, number of lost days, number of production hours lost, etc.

## Who can help?

Safety associations and WorkSafe Saskatchewan are excellent resources when you are developing your safety program.



## 6.5 Training

### WorkSafe Saskatchewan Training

Safety training is required to ensure that workers understand the hazards of their specific industry and learn how to work safely.

For example:

- If you work with or in proximity to chemicals, you will need WHMIS training.
- If you supervise workers, you will need supervision and safety training.
- If you are on the Occupational Health Committee, you will need OHC training.

WorkSafe Saskatchewan safety-related training

**[www.worksafesask.ca](http://www.worksafesask.ca)**

Phone: 306.787.4370

Toll free: 1.800.667.7590

Email: [worksafeinquiry@wcbask.com](mailto:worksafeinquiry@wcbask.com)

When developing a health and safety training system, it is important to include the following two elements.

### Safety orientation

This is a critical part of safety training. Introduce your workers to your health and safety program. New workers need to learn about your company's commitment to safety and their own OHS rights and responsibilities. All workers should take a basic WHMIS course. An online version is available through WorkSafe Saskatchewan at **[www.worksafesask.ca/training/online-courses/online-whmis-training/](http://www.worksafesask.ca/training/online-courses/online-whmis-training/)**.

*Young and New Worker Safety Orientation* guide, including a sample orientation checklist, is available online through WorkSafe Saskatchewan (Resources, Publications).

### Job-specific training

Ensure your workers can do their jobs safely. Job-specific training should take place when a worker is first hired and then again when assigned to new or different work.

This should entail three steps:

1. Show them.
2. Have them show you.
3. Supervise them.

Inform your new workers of their right to participate in the OHC.

Be sure workers receive any additional job-specific or role-specific safety training as required, such as crane or forklift certification, supervisor training, first responder training or fire warden training.

# NEW AND YOUNG WORKERS

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## 7.1 Special considerations for new and young workers

### Employers/Supervisors

- Be aware that new and young workers may not be comfortable asking questions about workplace health and safety.
- Provide orientation and ongoing training so new and young workers recognize hazards and are competent in safe work practices, procedures and the use of personal protective equipment.

For assistance utilize WorkSafe Saskatchewan's *Young and New Worker Safety Orientation* Guide, [www.worksafesask.ca](http://www.worksafesask.ca) – Resources, Publications.

- Encourage new and young workers to report any suspected hazards or safety concerns.
- Supervise new and young workers continuously.
- Know and comply with the regulations that apply to your workplace.
- Young or new workers can find out more information through the Young Workers' Readiness Certification Course (YWRCC), [www.worksafesask.ca/training/online-courses/young-worker-readiness-certificate-course/](http://www.worksafesask.ca/training/online-courses/young-worker-readiness-certificate-course/)
- Workers who are 14 or 15 must be certified through the YWRCC.





# EMERGENCY RESPONSE

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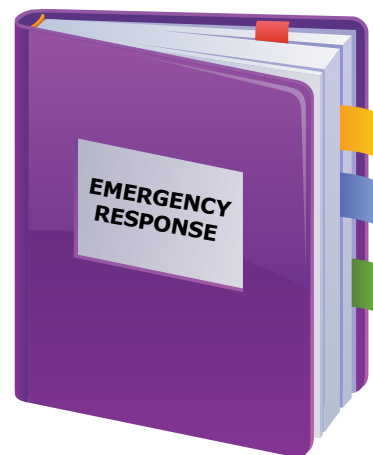


## 8.1 Emergency response

When an emergency occurs, your ability to make decisions immediately and bring resources into use quickly can mean the difference between life and death, saving your business or losing it. Employers are required to have a plan for responding to emergencies.

An emergency is an incident or disaster causing serious injury or damage. Emergencies may include, but are not limited to:

- Fires or explosions
- Hazardous chemical spills or biological exposures
- Severe injury that requires first aid or CPR
- Any incident involving an uncontrolled disruption or discharge or a leak of electricity, gas or water
- Any on- or off-road accident, incident or disaster where emergency vehicles, tow trucks or flag persons are present
- Workers trapped or incapacitated and requiring rescue
- Severe adverse weather or environmental conditions (such as wind, snow, flooding, extreme temperatures or lightning)
- Robbery and violence (such as an armed robber, active shooter, hostage taking or bomb threat)



Your company must have effective, documented emergency response plans and be able to support them.

Effective plans:

- prevent or minimize fatalities, injuries and loss.
- clearly define who is responsible for what.
- train everyone to follow procedures and use appropriate equipment.
- provide refresher training regularly.

### Whose job is it?

The employer must ensure emergency response plans are effective, documented, and readily available. Senior management and supervisors should be accountable for ensuring that plans stay current and that employees have been trained.

The OHC provides input and helps to monitor the plan's effectiveness.



## Whose job is it?

Test your emergency plan regularly and ensure all employees receive training on their role in implementing the emergency plan.

The employer must ensure emergency response plans are effective, documented, and readily available. Senior management and supervisors should be accountable for ensuring that plans stay current and that employees have been trained. The OHC provides input and helps to monitor the plan's effectiveness. Document your plan, test it regularly and keep copies on file. Test your emergency plan regularly and ensure all employees receive training on their role in implementing the emergency plan.

## 8.2 Emergency preparedness

Emergency preparedness means making sure you have the resources to deal with emergencies in the workplace.

Take the time **before** an emergency to identify hazards your company may face. Be confident that you have the right equipment, materials, training and procedures to respond properly.

To be prepared, do the following:

### Management ensures that:

- First-aid services, equipment and supplies are readily available onsite, and kept stocked, up to date, clean and dry.
- Workers with valid first-aid certificates are available onsite as required by the regulations.
- The first-aid record book is:
  - Accurately kept
  - Reviewed by management, the OHC and/or safety representative on specific dates, as required by the health and safety policy
- Emergency lighting is in places of employment normally used during periods of darkness or that do not have an available source of natural light.
- Emergency exits should:
  - Open in the direction of exit travel
  - Remain unlocked
  - Be accessible
  - Be marked by an exit sign
  - Be illuminated
  - Be clear of obstacles or obstructions.

## Emergency response

- Devise an emergency plan, including a firefighting plan, with which all workers are familiar. This includes procedures for the following emergencies:
  - Electrical failure or power outage
  - Chemical spills or gas leaks
  - Structural failure
  - Industry specific emergencies (such as rescue of workers trapped underground or in a confined space, working at heights or overcome by noxious or toxic chemicals).
  - Severe weather conditions in Saskatchewan, such as:
    - Blizzards and extreme cold
    - Extreme summer heat
    - Extreme winds or tornadoes
    - Hail storms
    - Electrical storms

It is now over a year since Gil's Gears formed the OHC. Larry is back to his original work schedule. He didn't need surgery. Vincent has been added to the staff as a salaried worker.

The extra steps for safety have become routine, and all workers look forward to the five-minute toolbox talks that start each monthly staff meeting. They've begun to share their own safety moments from home and work. The pre-use equipment inspections have spilled over into their home renovations and yard work. Gil's Gears' staff recently voted to donate skating helmets to the local school.

Every staff member has received WHMIS and first-aid training, and become CPR-certified. Mike and Rick posted a sign on the office door that says: "At Gil's Gears, safety doesn't happen by accident."



— The End —  
for now...

# WCB TERMS



**Appeal:** An appeal is the process by which employers can challenge any decision made by a worker of the Saskatchewan WCB with respect to a claim, an industry classification, experience rating or assessment decision.

**Assessable payroll:** The assessable payroll is the amount an employer pays to workers before deductions up to a maximum earnings limit as stipulated by the WCB. This includes gross wages (before deductions), salaries, commissions, bonuses, holiday pay and other remuneration.

**Assessment:** See premium.

**Contractor:** A contractor or subcontractor is a person or firm that operates a business and provides services to others, often using the contractor's own equipment and materials, in exchange for a predetermined payment.

**Due diligence:** Due diligence is a legal obligation requiring employers to take all reasonable precautions to prevent injuries or incidents in the workplace. This includes ensuring compliance with all relevant OHS rules and regulations and identifying and controlling workplace hazards.

**Employer:** An employer is any person, corporation, firm, association or body that hires workers on a full-time, part-time or casual basis, or hires contractors or subcontractors.

**Employer's Initial Report of Injury (E1):** The employer of an injured worker must file the **E1** form. The employer must report the claim within five days of becoming aware of the incident.

**Employer Payroll Statement (EPS):** Every business or person with an active WCB account is required to file annually by Feb. 28. Whether you hire payroll, casual or contract workers or have personal coverage, you are required to complete and submit this form. The EPS requests the actual wages for the previous year, estimate wages for the upcoming year, amount of personal coverage required and details of your contract workers hired in the prior year, in order to assess premiums.

**Experience Rating Program (ERP):** The WCB uses the ERP to determine whether to apply a discount or surcharge to an individual employer's premium based on that employer's claim history. This program encourages injury prevention.

**Hazard:** A hazard is a thing or condition that may expose a person to a risk of injury or occupational disease.

**Industry classification:** The WCB has broad industry classifications that group employers together based on similar work activities.

**Industry premium rate:** The industry premium rate is the rate that applies to an employer's assessable payroll, before any applicable discount or surcharge, to determine that firm's WCB premium. This rate is a dollar amount for every \$100 of assessable payroll (e.g. \$1.35 per \$100 of payroll).

**Incident report:** The incident report provides details of a workplace incident.

**Letter of good standing:** A letter of good standing is a letter requested before a contract begins that tells a principal if a contractor has a WCB account and if their status with us is in good standing. The letter is only good for the day it is given.

**Labour Relations and Workplace Safety (LRWS):** The Ministry of Labour Relations and Workplace Safety and the WCB have a memorandum of understanding to provide injury prevention and workplace safety initiatives through WorkSafe Saskatchewan.

**Net premium rate:** An individual employer's final premium rate based on their industry premium plus any applicable surcharge or minus any discount determined under the ERP.

**Occupational Health and Safety (OHS) Division:** The OHS Division is responsible for the regulation and enforcement of provincial occupational health and safety laws in the province.

**Occupational Health and Safety Regulations, 2020:** The regulations contain the legal requirements everyone in the workplace must meet to create safe and healthy workplaces. Under the regulations, employers and workers must work jointly in complying with OHS laws.

**Optional personal coverage (OPC):** OPC is optional coverage for individuals and firms not automatically covered under the Act, such as partners and proprietors (and the spouses of partners and proprietors). This OPC covers income replacement and medical services costs.

**Premium:** The premium (also called an assessment) is the amount of money the employer pays the WCB for workplace insurance coverage.

**Principal:** A principal is a business or person that hires another business or person to do contract work.

**Rate advice letter:** Employers will receive a letter that states what their base rate will be for the coming year and provides details of their experience rating discount or surcharge.

**Return-to-work (RTW) plan:** An RTW plan is a planned process to manage an injured worker's return to the workplace, including the documentation of the specific alternate or modified work identified and provided to him/her.

**Return-to-work (RTW) program:** An RTW program consists of documented processes (i.e. policies, procedures, standardized forms, etc.) for the purpose of identifying and providing alternate or modified work (temporary or permanent) for injured workers.

**Risk:** A risk is a chance of injury or occupational disease.

**Saskatchewan Employment Act (SEA):** The Act establishes the employment, labour relations and occupational health and safety standards in Saskatchewan. It sets out the general duties and responsibilities for employers, supervisors, workers, etc.

**Statement of account:** The statement of account shows what premium amount the employer owes to the WCB and the due dates of instalment payments.

**Worker:** A worker, including an apprentice or trainee, is someone employed on a full-time, part-time, casual or contract basis.

**Worker's Initial Report of Injury (W1):** Every worker who suffers a workplace injury must complete the **W1** form. This form starts a WCB claim.

**Workers' Compensation Act, 2013 (the Act):** The Act describes the jurisdiction of the Saskatchewan Workers' Compensation Board and its authority to make regulations.

**Workers' Compensation General Regulations, 1985:** The regulations provide clarity with respect to employer reporting and coverage.

**Workers' Compensation Act Exclusion Regulations:** This lists the industries and occupations excluded from the provisions of the Act.





# FORMS

## CONTENTS

### Employer Registration Application

Any business operating within an industry not excluded under the Act or the Miscellaneous Regulations is required to register with the WCB within 30 days of employing workers. Out-of-province employers who are sending workers into or through Saskatchewan to work should contact the WCB to determine registration requirements.

### **E1** Employer's Initial Report of Injury

An employer is required to submit an **E1** within five days of becoming aware of a workplace injury.

### **W1** Worker's Initial Report of Injury

Injured workers need to seek medical attention, report their injury to their employer, and file a **W1** form as soon as possible. This form can start a WCB claim.

### **E5** Employer's Progress Report

The WCB may send the **E5** to employers if they have an injured worker who is away from work. It is used to receive updates regarding return to work and earnings paid. For instance, it asks employers to confirm whether the worker is still off work, has returned to work and/or to what degree or has an expected return date.

### Medical Restrictions

The purpose of a Medical Restrictions form is to verify injury/illness and to provide restrictions in order to enable the worker to return to alternate or modified work as soon as possible.

### EPS Employer's Payroll Statement

In January each year, Employer Payroll Statements are sent out to all registered employers. They must be completed and returned to the WCB by Feb. 28. On this report, the employer is to supply the actual assessable payroll figures for the prior year, optional coverage requested (if applicable), and subcontractors hired. In addition, the employer also provides an estimate of its payroll for the current year.

### EROI Employer's Request for Photocopy of Relevant Records in File(s)

Employers who disagree with a WCB decision have the option to request information from their worker's file by completing and signing an **EROI** form. The WCB will let your worker know that you have requested information from the file. The worker has the right to object to the release of any sensitive or personal information not related to the decision under question.

### EREP Authorization Letter of Representation

You can authorize someone else to represent you or access information on your behalf about your WCB account or a specific injured worker's file. Before releasing any information, the WCB will require that you complete and sign an **EREP** form.

### ERO2 Employer's Representative's Request for Photocopy of File(s)

An authorized representative can request information from an injured worker's claim file using the **ERO2**.

### JIW Job Information Worksheet

A **JIW** identifies the physical, psychological, sensory and environmental demands on a worker performing essential job functions. It quantifies job demands, and includes descriptive information on the tools, equipment and processes necessary to do a specific job. The WCB may request a **JIW** to assess whether an injured worker is able to return to his/her original job or able to perform some essential job duties. A health-care provider may request a **JIW** to help them develop a treatment program.

**The following forms are samples only. You can access WCB forms at [www.wcsask.com](http://www.wcsask.com) or from the WCB offices.**

Click on any field to start editing.

Reset form

### Employer registration application

A. Business information			
Registered business name		Federal business number	
Operating name of business (if different from above)			
Name(s) of partners, proprietor, if applicable			
Has the business been purchased? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Purchase date	Seller's name		
mm/dd/yyyy			
B. Mailing address			
Street address/box number		City	
Business phone	Cellphone	Fax	
Physical address (if different from above)			
Street address or land location		City	Province
			Postal code
If you do not have a place of business in Saskatchewan, please answer the following questions:			
1. Will you come into Saskatchewan three or more times per year?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. Will you come into Saskatchewan for five or more consecutive days?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
C. Business operations			
Describe your business operations in detail. Include the products or services you provide.			
What tools or equipment do you use?			
Please provide the names of two of your competitors. This information can help with classifying a new business.			
Has your business been hired by (or contracted to) any other business or individual to do work?			
<input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, please provide the names of two businesses or individuals you have worked for:			

*Complete this form online. If you complete it on paper, fax it in to speed processing.*

## Guide to completing your employer registration application

### Before you start

Workers' compensation protects both employers and workers from the results of workplace injuries. Employers are protected against lawsuits and injured workers receive benefits.

You need to register for an employer account if you:

- Employ and pay workers on a full-time, part-time, casual and contract basis excluding directors.

If you come from another province or country to work in Saskatchewan, have no place of business in Saskatchewan and do not employ Saskatchewan resident workers, you should apply for an account if:

- You will come into Saskatchewan three or more times per year.
- You will come into Saskatchewan for five or more consecutive days.

Please have the following information available to complete your registration:

- Complete legal name of your business. If you are registering under a proprietorship or partnership, the legal names of the partners.
- Federal business number.
- Address and contact information.
- Details of the business operations.
- Start date of operations and date that workers started.
- An estimate of your payroll for workers excluding directors.
- List of contractors hired in previous years, including type of work and contract amounts.

### How to complete your application

#### Section A — Business information

Enter your business information, including your registered and operating names, federal business number, owners and contact information.

**Registered business name:** enter the legal name of your business (such as your registered business name).

**Federal business number:** enter the first nine digits of your Canada Revenue Agency (CRA) business number.

**Operating name of business:** enter the business name you use to conduct business (what your customers know your business as).

**Name(s) of partners, proprietor:**

- If your business is a partnership, enter the names of the partners.
- If your business is a proprietorship, enter the name of the proprietor.

**Purchase information:** if this business was purchased, check the "Yes" box and provide details of the sale. The answer to this question will determine how your account is set up.

### D. Workers and payroll information

Questions in Section D pertain to work completed in Saskatchewan only.

Do you have workers?  Yes  No

Do you hire contractors?  Yes  No If you have hired contractors in Saskatchewan in the last three years, please include a list with the contractor name, address, type of work and contract amounts.

Start date of first worker or contractor in Saskatchewan: \_\_\_\_\_

Please provide the gross earnings (before deductions) for all workers per person per calendar year.

2022	2023	2024	2025 estimate
(Max \$94,440 per person)	(Max \$96,945 per person)	(Max \$99,945 per person)	(Max \$104,531 per person)

a) Workers' Wages (excluding directors): \_\_\_\_\_

### E. Personal coverage

This optional coverage is available for proprietors and their spouses, partners and their spouses, and directors of corporations. Effective Jan. 1, 2025, directors receiving wages are no longer included in the definition of a worker under *The Workers' Compensation Act, 2013*. As a result, directors of a corporation will no longer have automatic WCB coverage. You may be able to purchase optional personal coverage with the WCB. This means you may be eligible for benefits if you are injured at work.

Do you wish to elect this type of optional coverage?  Yes  No

If yes, please provide the following information.

Name	Title	Date of birth	Coverage amount
		mm/dd/yyyy	
		mm/dd/yyyy	

Note: The minimum personal coverage amount is \$31,200.

### F. Declaration

By submitting this form, I certify and declare the following: I have provided all the information requested, complete, and correct to the best of my knowledge; I am authorized to make this declaration; I fully understand the content, the use of the information, and the consequences of the WCB will use and rely on this information in the management of the business; and that I or the business may be committing an offence under the *Workers' Compensation Act, 2013* if I make any false statement, omit any relevant information, or omit to provide any relevant information.

Name (please print)	Signature
	Please print and sign form before mailing/faxing.
Title	Date
	mm/dd/yyyy

Contact number \_\_\_\_\_

Call the WCB if you have questions while completing this form: 1.800.667.7590.

## Section B — Mailing address

Enter your business' contact details including the mailing address, physical address, telephone and fax numbers, and email address.

**Physical address:** enter the location where you are physically operating your business in Saskatchewan. This may be a street address or a land location.

## Section C — Business operations

Enter a description of your business operations. The Saskatchewan Workers' Compensation Board (WCB) classifies employers based on their primary business activity. Responses in this section will help determine which industry classification your business is assigned, which will determine the premium rate you pay. Please provide as much detail as possible.

**Note:** reviewing competitors and businesses you have worked for can help with classifying a new business, so please ensure these sections are completed.

**Business hired or contracted to do work:** enter the names of businesses or individuals that have paid you for products or services.

## Section D — Worker and payroll information

Enter your payroll information in this section. Only include information for work performed in Saskatchewan.

**Note:** Do not include more than the maximum assessable earnings per person per year.  
Maximum assessable for 2022: \$94,440      Maximum assessable for 2024: \$99,945  
Maximum assessable for 2023: \$96,945      Maximum assessable for 2025: \$104,531

**Workers' wages:** gross earnings before deductions for income tax, Employment Insurance, Canada Pension Plan and other similar deductions up to the maximum assessable amount per person for the calendar year being reported. Do not report any earnings for directors.

**Contractor:** a person or business hired under contract to perform work or services. A contractor may also be referred to as a subcontractor. Contract situations are present in all industries. Examples of contract situations include a restaurant that hires a plumber to fix a sink or a business office that hires a contract cleaner.

All contractors must be reported to the WCB. The WCB will review this information to determine if any of the contractors are considered your workers. Please attach a list of all contractors hired in Saskatchewan in the past three years. Include the name of the contractor, address, type of work and the amount of the contract.

If a contractor is not registered with the WCB, they will be deemed to be your worker and you will be responsible for paying premiums on the labour portion of the contract.

Prior to making payment to a contractor, you are required to obtain a clearance letter. A clearance letter tells you if you can make a payment to a contractor for completed work. If the account is in good standing, the WCB will tell you to pay the contractor. If the account is not in good standing, the WCB will request that payment be withheld. A clearance protects you from having to pay any overdue premiums the contractor owes to the WCB.

## Section E — Personal coverage

Enter requests for personal coverage in this section.

### What is personal coverage?

Personal coverage is optional coverage for individuals not automatically covered under the Act. When personal coverage is purchased, the applicant is eligible for benefits under the Act, which includes medical and rehabilitation costs, as well as wage loss. Learn more by visiting [www.wcbask.com](http://www.wcbask.com).

### Who can purchase personal coverage?

Personal coverage may be purchased by:

- Proprietors and their spouses.
- Partners and their spouses.
- Directors of a for-profit corporation.

Personal coverage may be purchased for any amount between the minimum personal coverage amount (\$31,200) and the maximum assessable wage rate (\$104,531). Where the amount of coverage requested is higher than the minimum personal coverage amount, the applicant will be required to substantiate actual employment earnings in the event of an injury. The WCB will accept one of the following documents as proof of earnings:

- A T4 income tax slip as submitted to the Canada Revenue Agency (CRA).
  - A Statement of Business or Professional Activities as submitted to the CRA, or
- In the absence of these documents, the WCB may accept an audited financial statement.

### Why do we need your birthdate?

Your birthdate is used as an additional identifier when selecting personal coverage, as there are instances where two people have the same name.

## Section F — Declaration

This application must be signed by an authorized representative of the business. Please ensure to include a phone number in case the WCB needs additional information to process your application.

**Employer's Initial Report of Injury**

WCB claim number: \_\_\_\_\_

Reporting options: 1) Phone: 1.800.787.9288 2) www.wcsask.com 3) Fax

**Section A: Employer Information**

Company name: \_\_\_\_\_ Type of business: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
City: \_\_\_\_\_ Contact person: \_\_\_\_\_  
Email: \_\_\_\_\_  
WCB firm number: \_\_\_\_\_ Industry rate code: \_\_\_\_\_

*Complete this form as soon as you are aware of the injury.*

*You must complete this form if a worker seeks medical treatment for a work injury.*

**Section B: Worker Information**

Name: \_\_\_\_\_ Specific division (if applicable): \_\_\_\_\_  
Address: \_\_\_\_\_ Occupation: \_\_\_\_\_  
City: \_\_\_\_\_ Social Insurance Number: \_\_\_\_\_  
Phone(s): \_\_\_\_\_ Provincial Health Number: \_\_\_\_\_  
Date of birth: \_\_\_\_\_ Sex:  Male  Female  
Hire date: \_\_\_\_\_

*Provide any information you have if you think this may NOT be a work injury.*

**Section C: Injury Information**

1. Injury date: \_\_\_\_\_ No  
2. Reported to employer on: \_\_\_\_\_ of injury: \_\_\_\_\_  
4. Area of body injured: \_\_\_\_\_  
5. Name of health care provider: \_\_\_\_\_  
6. How did the injury happen? \_\_\_\_\_  
7. Has the worker lost time from work, due to the injury, after the day of injury?   
8. First day off and time worker left work due to this injury: Date: \_\_\_\_\_  
9. Has the worker returned to work?  Yes  No If "yes," what was the date the worker returned? \_\_\_\_\_  
10. Do you have any reason to believe that this is not a work-related incident?  Yes  No If "yes," provide attachment(s) with explanation.

**Section D: Wage and Employment Information**

11. How is the worker paid? If regular salary: Hourly \$ \_\_\_\_\_ per hour, \_\_\_\_\_ hours per week; If monthly \$ \_\_\_\_\_  
If non-regular:  Piecework  Contractor  Owner/operator  Casual  Other (explain) \_\_\_\_\_  
12. Provide gross earnings for the 12 months preceding first day off due to the work injury: \$ \_\_\_\_\_  
If less than 12 months, provide gross earnings and time period: \$ \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_  
13. Time lost during the gross earnings period due to: (a) Unpaid sickness: \_\_\_\_\_ days; (b) Prior WCB claims \_\_\_\_\_ days; (c) Lack of work: \_\_\_\_\_ days; (d) Other \_\_\_\_\_ days (Explain): \_\_\_\_\_  
14. Normal working hours for the worker: From \_\_\_\_\_ a.m. \_\_\_\_\_ p.m. To \_\_\_\_\_ a.m. \_\_\_\_\_ p.m. Was there shift work involved?  Yes  No  
15. Does the worker have regular days off?  Yes  No If "yes," mark which days off: Sun Mon Tue Wed Thu Fri Sat  
If "no," mark the days off for the month of the injury, plus one month before and one month after first day off due to injury.

MONTH OF INJURY PERIOD	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
MONTH AFTER INJURY PERIOD	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
MONTH BEFORE INJURY PERIOD	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31

16. TD1 exemptions:  Single  Spouse, if partial Provincial amount \$ \_\_\_\_\_ Federal amount \$ \_\_\_\_\_  
 Other: \$ \_\_\_\_\_ Number of children 18 years or under: \_\_\_\_\_  
17. Should compensation payments be made to:  Worker, OR  Employer?

**Section E: Declaration**

I declare all the information provided is true and correct. I understand that criminal prosecution or penalties may result from any attempt to (1) obtain compensation benefits by fraudulent means and/or (2) prevent collection of compensation benefits.

Date \_\_\_\_\_ Name (please print) \_\_\_\_\_ Title \_\_\_\_\_ Signature \_\_\_\_\_



**Worker's Initial Report of Injury**

WCB claim number: \_\_\_\_\_

Reporting options: 1) WCB Teleservice 1.800.787.9288 2) www.wcsask.com 3) Fax

**Section A: Worker Information**

Name, address, postal code \_\_\_\_\_  
Gender:  Female  Male

*Any questions? Call WCB Teleservice at 1.800.787.9288*

**Section B: Employer Information**

Name, address, postal code \_\_\_\_\_  
Employer contact person: \_\_\_\_\_  
Phone number of contact: \_\_\_\_\_  
Industry rate code: \_\_\_\_\_

**Section C: Injury Information**

1. Injury date: \_\_\_\_\_ 2. Reported to employer on: \_\_\_\_\_ 3. Reported to: \_\_\_\_\_  
4. Province of injury: \_\_\_\_\_ 5. Area of body injured: \_\_\_\_\_  
6. How did the injury happen? \_\_\_\_\_  
7. Name \_\_\_\_\_  
8. Name \_\_\_\_\_  
9. Have you had any other employment since the injury?  Yes  No

*Let us know about any other employment affected by the injury.*

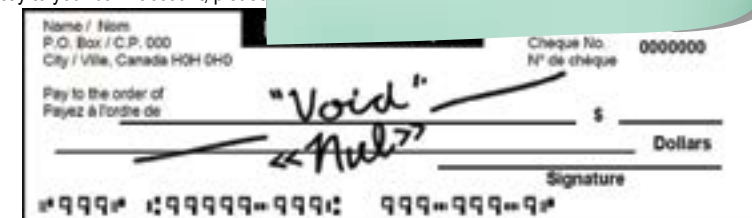
*For fastest and most secure payment, the worker should provide direct deposit information.*

**Section D: Direct Deposit Information**

10. First day off: \_\_\_\_\_ Time: \_\_\_\_\_  
11. Have you provided direct deposit information?  Yes  No If "yes," enter the date and time: \_\_\_\_\_  
12. How often do you receive direct deposit payments? \_\_\_\_\_ per hour \_\_\_\_\_  
13. If you have regular days off mark which days: \_\_\_\_\_ in  Mon  Tue  Wed  Thu  Fri  Sat

**Section E: Direct Deposit Information**

If you wish to have your compensation payments made directly to your bank account, please attach a void cheque to this form (see example beside) and fax directly to the WCB at 1.888.844.7773, or mail to the WCB; OR  
• Have someone from your bank complete, sign and stamp a bank deposit request form and fax directly to Finance or mail it to the WCB; OR  
• If you need assistance, call 1.800.667.7590.



Please note: If you change or close your account, let the WCB know in writing to avoid any delay in payment.

**Section F: Declaration**


I declare all the information provided is true and correct. I understand that criminal prosecution or penalties may result from any attempt to (1) obtain compensation benefits by fraudulent means and/or (2) prevent collection of compensation benefits.

Date \_\_\_\_\_ Name (please print) \_\_\_\_\_ Signature \_\_\_\_\_




**Employer's Progress Report**

WCB claim number: \_\_\_\_\_

<p><b>Section A: Employer Information</b></p> <p>Name, address, postal code _____</p> <p>Business phone number: _____</p> <p>WCB firm number: _____ Rate code: _____</p> <p><b>To complete the form, please:</b></p> <ol style="list-style-type: none"> <li>1. Type or print using ink.</li> <li>2. Be accurate and provide all information requested.</li> <li>3. Ensure you date and sign the declaration at bottom.</li> <li>4. Attach additional information, if relevant.</li> <li>5. Mail OR fax report to WCB, keep copy for your own records.</li> <li>6. Contact the WCB if you have any questions.</li> </ol>	<p><b>Section B: Worker Information</b></p> <p>Name, address, postal code _____</p> <p>Injury date: _____</p> <p>Area of injury: _____</p> <div style="border: 1px solid black; padding: 5px; margin-top: 20px; text-align: center;">  <p><i>The WCB will send you this form monthly if you have an injured worker who is away from work.</i></p> </div>
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**Section C: Complete A or B**

<p><b>A. The worker has returned to work</b></p> <p>1. Date returned: (MM/DD/YYYY) Time: _____ <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.</p> <p>2. Is the worker doing the same job as before the injury? <input type="checkbox"/> Yes <input type="checkbox"/> No, explain: _____</p> <p>3. Is the worker earning the same amount now as before the injury? <input type="checkbox"/> Yes <input type="checkbox"/> No, now earning \$ _____ (hour/week/month)</p> <p>4. Did the worker return to work on _____ p.m.</p> <p>5. Did you _____ p.m.</p>	<p><b>B. The worker has NOT returned to work</b></p> <p>1. Have you discussed a return-to-work plan with this worker? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>2. Is the worker expected to return to work? <input type="checkbox"/> No <input type="checkbox"/> Yes, when: Date returned: (MM/DD/YYYY) Time: _____ <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.</p> <p>3. Will the return to work be: <input type="checkbox"/> Full duties <input type="checkbox"/> Modified duties, explain: _____</p> <p>4. Will the return to work result in any wage loss? <input type="checkbox"/> No <input type="checkbox"/> Yes, amount \$ _____ explain: _____</p> <p>5. Has the worker worked between the day of injury and the date of this report? <input type="checkbox"/> No <input type="checkbox"/> Yes, give dates: (MM/DD/YYYY) Time: _____ <input type="checkbox"/> a.m. <input type="checkbox"/> p.m. (MM/DD/YYYY) Time: _____ <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.</p> <p>6. Did you pay the worker anything for the period of work? <input type="checkbox"/> Yes, amount \$ _____ <input type="checkbox"/> No, reason: _____</p>
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*The injured worker will receive a Worker's Progress Report (W3).*

I declare all the information provided is true and correct. I understand that criminal prosecution or penalties may result from any attempt to (1) obtain compensation benefits by fraudulent means and/or (2) prevent collection of compensation benefits.

Date: (MM/DD/YYYY) Title: \_\_\_\_\_ Signature: \_\_\_\_\_

# Medical Restrictions

## Health Care Practitioner Information:

This company recognizes that the provision of alternate or modified work is important in the prevention of disability and has established a Return-to-Work (RTW) Program for employers to use when they have a worker who is unable to perform any or all of their normal duties as a consequence of an injury/illness.

The purpose of a medical restrictions form is to verify injury/illness and to provide restrictions in order to enable the worker to return to alternate or modified work as soon as possible.

[If a medical restrictions form is used for a work injury at the initial visit, please bill WCB code 640]

**Medical Restrictions:** Clear and specific limits, including, but not limited to, specific work activities, exposures, body motions, positional tolerances (i.e. ability to sit, stand, stoop for a protracted time, etc.), timeframes, and lifting and/or material handling capabilities, as identified by the injured worker's health care provider(s), required to protect the worker from further injury. Medical restrictions arising from an injury may be physical, cognitive and/or psychological and be of a temporary or permanent nature.

We require this information in order to identify suitable work that is both productive and safe.

Any work assignments will honour the outlined restrictions.

If we are unable to offer work that is appropriate to the outlined restrictions, the worker will be off work.

Please provide the worker's current capabilities and/or restrictions, and the expected duration of any restrictions (i.e. no lifting until musculoskeletal assessment).

It is expected that all restrictions will be based upon objective medical evidence.

**Worker Instructions:**

- Report injuries and absences for medical reasons to your supervisor immediately
- Obtain medical treatment
- Have your health care provider complete the Medical Restrictions form (on back) during your initial visit to provide you with your restrictions

**If medical restrictions do not affect your ability to do your job, return to work for your next scheduled shift.**

**If medical restrictions affect your ability to do your job:**

- Call your supervisor as soon as possible to let him/her know that your injury has affected your ability to do your job
- At your RTW planning meeting, you will be provided (if possible) with suitable work within your restrictions as outlined on the Medical Restrictions form. The alternate or modified work will:
  - Honour your current medical restrictions
  - Be modified if and/or when your medical restrictions change
  - Allow time for further diagnostic and/or treatment appointments
- Have your health care provider complete another medical restrictions form during any follow-up appointments if your medical restrictions change

*continued on other side*



F A C T S H E E T

# Medical Restrictions form

continued from front

Company name \_\_\_\_\_

Company address \_\_\_\_\_

**If this form is being used for a work injury at the initial visit, please bill WCB code 640.**

The purpose of this form is to verify injury/illness and to provide restrictions to the employer in order to enable the worker to return to *alternate or modified work* as soon as possible.

The employer requires this information in order to identify suitable work that is both productive and safe. Any work assignments will honour the outlined restrictions.

If the employer is unable to offer work that is appropriate to the outlined restrictions, the worker will be off work.

Please complete and give to worker for delivery to the employer.

**Worker's name:** \_\_\_\_\_

**Due to injury/illness the following physical, cognitive or psychiatric restrictions currently apply:**

**This form MUST be kept confidential!**

**Expected duration of restrictions:**  
 <7days     8-14 days     15-21 days     >21 days

Health care provider name and signature	Date

Health care provider is not required to send a copy to the WCB.

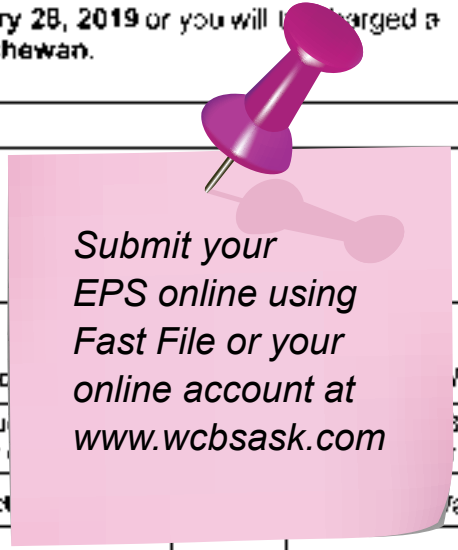
**E-5**



2100 - 1881 South Street  
Regina, SK S4P 4L1  
Tel: 306 787 4370  
Toll free: 1.800.667.7590  
Fax: 306 787 4205  
Toll-free fax: 1.877.220.1871  
Email: employerservices@wcbask.com  
www.wcbask.com

Firm Number \_\_\_\_\_  
Access Code \_\_\_\_\_

Submit this information online at [www.wcbask.com](http://www.wcbask.com) by **February 28, 2019** or you will be charged a penalty. **Only include information for work done in Saskatchewan.**



**Section 1: Mailing Address and Business Information**  
 If your name/address listed above has changed please update.  
 Have you closed your business or stopped operations in Saskatchewan? If yes, when? \_\_\_\_\_  
 Have you sold your business? Provide details: \_\_\_\_\_

**Section 2a: Workers' Information - Reminder: Include directors who receive a T4**

Gross Earnings before deductions (up to the maximum per worker per calendar year)	2018 maximum (per worker per year)	Industry Code	Description	Rate	Act	Pages
	314					

**Section 2b: Director Information - Reminder: Directors who receive a T4 should be included in the wage estimate in Workers' Information and please list their names below. If no directors are carried on payroll, no names are required.**

Industry Code	Name(s)	2018 Coverage Amount	2019 Coverage Amount

**Section 3: Personal Coverage**

Industry Code	Name(s)	2018 Coverage Amount	2019 Coverage Amount

**Section 4: Contractor Services**

In 2018, did you pay a person or business to perform work or services on a contract basis? If yes, complete the attached form.  Yes  No

Will you be hiring contractors in 2019?  Yes  No

2019 estimated labour amount for non-registered contractors (if desired): \_\_\_\_\_



**EPS CONTRACTOR LIST**

File No: \_\_\_\_\_

Please return your contractor list with your completed EPS. If additional space is required, please make copies of this form. Contractors listed here should not be included under Section 2 - Workers' Wage Information. Please print clearly to assist us in processing the information.

**Contractors To Be Reported (where clearances were not obtained). Please provide the information requested.**

Contractor WCB Firm # (if any)	CONTRACTOR NAME AND ADDRESS	DESCRIPTION OF WORK PLANT/PROJECT	WORK CONTRACT NUMBER	LABOUR TYPE (e.g. construction, maintenance, etc.)	LABOUR POSITION (if any)

*Provide the (sub) contractor's firm number, not your firm number (top right).  
Don't forget to include a description of the work.*

**Employer's Request for Photocopy of Relevant Records in File(s)**

**ATTENTION: CASE MANAGEMENT REPRESENTATIVE**

Workers' Compensation Board Claim Number(s): \_\_\_\_\_  
Injured Worker's Name: \_\_\_\_\_  
Date of Decision Being Appealed: \_\_\_\_\_

I request photocopies of the above file(s) on the above claim(s) in which the disputable issue is:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I understand the Board must notify the worker of this request and he/she has to it.  
I confirm that I am the employer or have been duly authorized to make this authorization.  
In accordance with the provisions of Section 174(1), (2), of the *Workers' Compensation Board Act, 2013*, I will not use any information contained in the file for any purpose other than of pursuing the disputable issue with the Board.  
Your request for a copy of the file is NOT a request for a copy of the worker's file.

*You can only ask for a worker's file if you have a disputable and appealable issue.  
You will only receive information regarding your disputable issue.*

Dated this \_\_\_\_\_ day of \_\_\_\_\_  
Name: \_\_\_\_\_ (Please print)  
Signed: \_\_\_\_\_  
Position/Title: \_\_\_\_\_

**Authorization  
Letter of Representation**

I, \_\_\_\_\_  
(print name in full)

authorize Mr.  Ms.  Mrs.  \_\_\_\_\_  
(print name in full)

Representative mailing address: \_\_\_\_\_  
\_\_\_\_\_  
(Please include: Street name, street number, city, province and postal code)

Phone: \_\_\_\_\_

to represent \_\_\_\_\_ with regards to  
(print name of company in full) the following:

*You must inform the WCB in writing when you no longer want the representative.*

\_\_\_\_\_  
\_\_\_\_\_  
(indicate specific issue) \_\_\_\_\_  
In accordance with the provisions of Section 174(1) of the Workers' Compensation Act, 2013, my representative will not use information contained in the said file(s) or for any purpose other than reconsideration or review of a disputable issue with the Workers' Compensation Board.

This letter of representation will remain in full force and effect until such time as I notify the Workers' Compensation Board in writing that I no longer wish the individual named above to act as my representative.

Signed and witnessed at \_\_\_\_\_, in the Province of \_\_\_\_\_  
on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Firm name and number: \_\_\_\_\_  
(print in full)

*This form must accompany the ERO2.*

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Witness\* \_\_\_\_\_  
(print name in full)

\_\_\_\_\_  
(Signature)

\* = Someone other than the person being designated as the representative



**Employer's Representative's  
Request for Photocopy of File(s)**

**ATTENTION: CLIENT SERVICE REPRESENTATIVE**

Workers' Compensation Board Claim number(s) \_\_\_\_\_

Injured Worker's Name \_\_\_\_\_

Date of Decision Being Appealed \_\_\_\_\_

I request photocopies of the above file(s) on the issue is:

*Some employers choose to use a representative rather than pursue an appeal on their own.*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I confirm that I have been duly authorized to do so and to represent \_\_\_\_\_  
\_\_\_\_\_, as per attached authorization.

I understand the Board must notify the worker of this request and consider any objections he has to it.

In accordance with the provisions of Section 174(1) of The Workers' Compensation Act, 2013, I will not use any information contained in the said file(s) publicly or for any purpose other than of pursuing the disputable issue with the Workers' Compensation Board.

Dated this \_\_\_\_\_, 20\_\_\_\_

Signed \_\_\_\_\_

Position/Title \_\_\_\_\_

Address \_\_\_\_\_

*The EREP form must accompany this one.*

## Job Information WorkSheet

WCB claim number: \_\_\_\_\_

Please ensure this form is completed as fully as possible by the worker's immediate supervisor and the worker.

Questions? Contact the WCB toll free in Saskatchewan: 1.800.667.7590. Regina: 306.787.4370.

Name: \_\_\_\_\_ Worker's position title: \_\_\_\_\_

Occupation: \_\_\_\_\_ Worker signature: \_\_\_\_\_

Other jobs worker may have: \_\_\_\_\_

Employer: \_\_\_\_\_

Employer signature: \_\_\_\_\_

Employer address: \_\_\_\_\_

*Both the worker and employer complete this form.*

FOR EMPLOYER & WORKER USE ONLY - Describe actual work activities	
<b>JOB NORMALLY REQUIRES</b>	
<b>SITTING (INCLUDES DRIVING)</b>	
<p>Total number of sitting hours in a shift:</p> <input type="checkbox"/> Less than 1 <input type="checkbox"/> 1 - 2 <input type="checkbox"/> 2 - 3 <input type="checkbox"/> 3 - 4 <input type="checkbox"/> 4 - 5 <input type="checkbox"/> 5 - 6 <input type="checkbox"/> 6 - 7 <input type="checkbox"/> 7 - 8 <input type="checkbox"/> More than 8	<p>Total length of time worker sits before standing:</p> <input type="checkbox"/> Under 30 minutes <input type="checkbox"/> 30 - 60 minutes <input type="checkbox"/> 1 - 2 hours <input type="checkbox"/> 2 - 3 hours <input type="checkbox"/> 3 - 4 hours <input type="checkbox"/> More than 4 hours
<p><b>ADDITIONAL DESCRIPTION</b> On what kind of seating?</p>	
<b>STANDING</b>	
<p>Total number of standing hours in a shift:</p> <input type="checkbox"/> Less than 1 <input type="checkbox"/> 1 - 2 <input type="checkbox"/> 2 - 3 <input type="checkbox"/> 3 - 4 <input type="checkbox"/> 4 - 5 <input type="checkbox"/> 5 - 6 <input type="checkbox"/> 6 - 7 <input type="checkbox"/> 7 - 8 <input type="checkbox"/> More than 8	
<p><b>ADDITIONAL DESCRIPTION</b> On what kind of surface?</p>	
<b>BALANCE</b>	
<p>Special circumstances requiring good balance?</p>	

*Use the duties performed the day before the injury to help you complete these sections.*

FOR EMPLOYER & WORKER USE ONLY - Describe actual work activities		
<b>JOB NORMALLY REQUIRES</b>		
<b>WALKING</b>		
Normal distance that must be walked:		
How often that distance must be walked during a shift:		
What type of surface?		
<b>CLIMBING STAIRS</b>		
How many one-storey flights of stairs (about 13 steps) must be climbed at one time?		
How many times in a shift do stairs have to be climbed?		
What surface?		
<b>CLIMBING LADDERS</b>		
How high is the normal climb?		
How many times in a shift must a ladder be climbed?		
Is work done from a ladder? How long at one time?		
<b>KNEELING/CRAWLING/CROUCHING/SQUATTING</b>		
Describe the activity:		
Number of times this occurs in a normal shift?		
Length of time spent in this position in a single, normal instance?		
On what kind of surface?		
<b>LIFTING FROM FLOOR TO WAIST</b>		
<p>How much is normally lifted?</p> <input type="checkbox"/> Less than 4.5 kg (1 - 10 lb) <input type="checkbox"/> Up to 9 kg (11 - 20 lb) <input type="checkbox"/> Up to 22.7 kg (21 - 50 lb) <input type="checkbox"/> More than 22.7 kg (50 lb)	<p>How many times during a shift is lifting required?</p> <input type="checkbox"/> <4.5 kg (1 - 10 lb) _____ times <input type="checkbox"/> 4.5 - 9 kg (11 - 20 lb) _____ times <input type="checkbox"/> 9 - 22.7 kg (21 - 50 lb) _____ times <input type="checkbox"/> > 22.7 kg (50 lb) _____ times	<p>Nature of lifting:</p> <input type="checkbox"/> Independently <input type="checkbox"/> With human assistance <input type="checkbox"/> With mechanical assistance
<p>Please state amount lifted: _____ Please state amount lifted: _____</p>		
<b>ADDITIONAL DESCRIPTION</b>		
What is lifted?		
Size of object?		
Workstation layout (clear or cluttered aisles, width of space, floor surface, etc.)?		

*The assessment team will use this form to evaluate how the injury affects the worker and to help the worker return to work safely.*



**JOB NORMALLY REQUIRES**

**LIFTING FROM WAIST TO SHOULDER**

How much is normally lifted?

- Less than 4.5 kg (1 - 10 lb)
- Up to 9 kg (11 - 20 lb)
- Up to 22.7 kg (21 - 50 lb)
- More than 22.7 kg (50 lb)

Please state amount lifted: \_\_\_\_\_

How many times during a shift is lifting required?

- <4.5 kg (1 - 10 lb) \_\_\_\_\_ times
- 4.5 - 9 kg (11 - 20 lb) \_\_\_\_\_ times
- 9 - 22.7 kg (21 - 50 lb) \_\_\_\_\_ times
- > 22.7 kg (50 lb) \_\_\_\_\_ times

Please state amount lifted: \_\_\_\_\_

Nature of lifting:

- Independently
- With human assistance
- With mechanical assistance

**ADDITIONAL DESCRIPTION**

What is lifted?

Size of object?

Workstation layout (clear or cluttered aisles, width of space, floor surface, etc.)?

**LIFTING FROM ABOVE SHOULDER**

How much is normally lifted?

- Less than 4.5 kg (1 - 10 lb)
- Up to 9 kg (11 - 20 lb)
- Up to 22.7 kg (21 - 50 lb)
- More than 22.7 kg (50 lb)

Please state amount lifted: \_\_\_\_\_

How many times during a shift is lifting required?

- <4.5 kg (1 - 10 lb) \_\_\_\_\_ times
- 4.5 - 9 kg (11 - 20 lb) \_\_\_\_\_ times
- 9 - 22.7 kg (21 - 50 lb) \_\_\_\_\_ times
- > 22.7 kg (50 lb) \_\_\_\_\_ times

Please state amount lifted: \_\_\_\_\_

Nature of lifting:

- Independently
- With human assistance
- With mechanical assistance

**ADDITIONAL DESCRIPTION**

What is lifted?

Size of object?

Workstation layout (clear or cluttered aisles, width of space, floor surface, etc.)?

**CARRYING**

How much is normally lifted?

- Less than 4.5 kg (1 - 10 lb)
- Up to 9 kg (11 - 20 lb)
- Up to 22.7 kg (21 - 50 lb)
- More than 22.7 kg (50 lb)

Please state amount carried: \_\_\_\_\_

How many times during a shift is lifting required?

- <4.5 kg (1 - 10 lb) \_\_\_\_\_ times
- 4.5 - 9 kg (11 - 20 lb) \_\_\_\_\_ times
- 9 - 22.7 kg (21 - 50 lb) \_\_\_\_\_ times
- > 22.7 kg (50 lb) \_\_\_\_\_ times

Please state amount carried: \_\_\_\_\_

Nature of carrying:

- Independently
- With human assistance
- With mechanical assistance

**ADDITIONAL DESCRIPTION**

What is lifted?

Size of object?

Workstation layout (clear or cluttered aisles, width of space, floor surface, etc.)?

**JOB NORMALLY REQUIRES**

**MOBILE PULLING/PUSHING (OBJECTS ON WHEELS)**

How heavy is the object normally pulled or pushed?

- Less than 4.5 kg (1 - 10 lb)
- Up to 9 kg (11 - 20 lb)
- Up to 22.7 kg (21 - 50 lb)
- More than 22.7 kg (50 lb)

Please state amount pulled or pushed: \_\_\_\_\_

How many times during a shift is pulling or pushing required?

- <4.5 kg (1 - 10 lb) \_\_\_\_\_ times
- 4.5 - 9 kg (11 - 20 lb) \_\_\_\_\_ times
- 9 - 22.7 kg (21 - 50 lb) \_\_\_\_\_ times
- > 22.7 kg (50 lb) \_\_\_\_\_ times

Please state amount pulled or pushed: \_\_\_\_\_

What is being used to pull/push?

- Trolley  Cart
- Other (Specify) \_\_\_\_\_

**ADDITIONAL DESCRIPTION**

What is being pulled or pushed?

Size of object?

How far is the object pulled or pushed?

Workstation layout (clear or cluttered aisles, width of space, floor surface, etc.)?

What surface?

Is the surface:

- Level  Sloped

**STATIC PULLING/PUSHING (BOXES, LEVERS, PULLEYS)**

How heavy is the object normally pulled or pushed?

- Less than 4.5 kg (1 - 10 lb)
- Up to 9 kg (11 - 20 lb)
- Up to 22.7 kg (21 - 50 lb)
- More than 22.7 kg (50 lb)

Please state amount pulled or pushed: \_\_\_\_\_

How many times during a shift is pulling or pushing required?

- <4.5 kg (1 - 10 lb) \_\_\_\_\_ times
- 4.5 - 9 kg (11 - 20 lb) \_\_\_\_\_ times
- 9 - 22.7 kg (21 - 50 lb) \_\_\_\_\_ times
- > 22.7 kg (50 lb) \_\_\_\_\_ times

Please state amount pulled or pushed: \_\_\_\_\_

What is being used to pull/push?

- Trolley  Cart
- Other (Specify) \_\_\_\_\_

**ADDITIONAL DESCRIPTION**

What is being pulled or pushed?

Size of object?

How far is the object pulled or pushed?

Workstation layout (clear or cluttered aisles, width of space, floor surface, etc.)?

What surface?

Height of object: \_\_\_\_\_

Is the surface:

- Level  Sloped

**LOW BACK MOVEMENTS (BENDING FORWARD, BENDING BACKWARD, TWISTING)**

This activity involves:

- Bending forward
  - How often in a shift? \_\_\_\_\_
  - How long each time? \_\_\_\_\_
- Bending backward
  - How often in a shift? \_\_\_\_\_
  - How long each time? \_\_\_\_\_
- Twisting
  - How often in a shift? \_\_\_\_\_
  - How long each time? \_\_\_\_\_
- Lateral flexation
  - How often in a shift? \_\_\_\_\_
  - How long each time? \_\_\_\_\_

These movements are:

- Held more than five minutes at a time
- Repeated frequently

Workstation layout (clear or cluttered aisles, width of space, floor surface, etc.)?

These movements are:

- From a seated position
- From a standing position
- From both

**JOB NORMALLY REQUIRES**

**REACHING OVERHEAD**

Is the reach at or beyond full arms length?

- Yes  No

How long is the reach sustained?

How often does this occur in the most active hour?

How often in a normal shift?

How often does this occur in the most active hour?

How often in a normal shift?

**REACHING FORWARD**

Is the reach at or beyond full arms length?

- Yes  No

How long is the reach sustained?

How often does this occur in the most active hour?

How often in a normal shift?

Workstation layout:

Height

Depth

- Standing

- Seated

**NECK MOVEMENTS**

This activity involves:

- Looking up

- How long at any one time? \_\_\_\_\_
- How often in a busy hour? \_\_\_\_\_
- How often in a normal shift? \_\_\_\_\_

- Looking down

- How long at any one time? \_\_\_\_\_
- How often in a busy hour? \_\_\_\_\_
- How often in a normal shift? \_\_\_\_\_

- Looking behind

- How long at any one time? \_\_\_\_\_
- How often in a busy hour? \_\_\_\_\_
- How often in a normal shift? \_\_\_\_\_

- Rotation

- How long at any one time? \_\_\_\_\_
- How often in a busy hour? \_\_\_\_\_
- How often in a normal shift? \_\_\_\_\_

These neck positions are:

- Held more than five minutes at a time
- Repeated, frequent movements

**WORKING WITH HANDS AND FINGERS**

How much time in a normal shift involves this activity?

- Less than 1 hour
- 1 - 2  2 - 3
- 3 - 4  4 - 5
- 5 - 6  6 - 7
- 7 - 8  More than 8

What items are being handled?

What tools, if any, are used?

Circumference of tools?

Workstation layout (height positioning, fumes, heat, etc.)?

**JOB NORMALLY REQUIRES**

**VISUAL ACUITY**

Distance from eyes to object on job?

Describe how vision relates to the job. (driving , close or far distances, working with small objects, reading, etc.)

**OPERATING MOTORIZED EQUIPMENT**

How much total time in a normal shift involves operating motorized equipment?

- Less than 1 hour  1 - 2  2 - 3
- 3 - 4  4 - 5  5 - 6
- 6 - 7  7 - 8  More than 8

Length of time normally operating equipment before taking a break or changing positions?

- Less than 30 minutes  30 - 60 minutes
- 1 - 2 hours  2 - 3 hours
- 3 - 4 hours  More than 4 hours

Describe the equipment and work situation.

**SENSITIVITY TO CHEMICAL SUBSTANCES**

What chemicals is the worker exposed to?

Describe the amount of exposure.

What protective apparatus is used, if any?

**WORK ENVIRONMENT**

The work environment involves:

- Outdoors  Indoors
- Heat  Cold
- Moisture  Dryness
- Fumes  Vibration
- Jarring  Noise
- Below 80 decibels
- Above 80 decibels

Describe the work environment.

**RESTRICTED WORKING HOURS**

How long is a normal shift?

**MENTAL/EMOTIONAL LIMITATIONS**

Describe any significant stresses or emotional aspects of the job.

What services (EAP/EFAP) are available?

**OTHER**

Are there other physical job duties that are expected? (For example: running, throwing, etc.)

If so, how often are these activities required?



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## The WCB

To help us respond to inquiries quickly and effectively, please include your name, firm name, phone number, email address and claim number when applicable.

### Saskatchewan Workers' Compensation Board

#### Head office

200 – 1881 Scarth Street  
Regina SK S4P 4L1

**Main switchboard:** 306.787.4370

**Toll free:** 1.800.667.7590

#### Saskatoon office

800 – 122 1st Ave. S.  
Saskatoon SK S7K 7E5

**Main switchboard:** 306.933.6312

**Toll free:** 1.800.667.7590

### Employer Services

**Phone:** 306.787.4370

**Toll free:** 1.800.667.7590

**Fax:** 306.787.4205

**Toll free fax:** 1.877.220.1671

**Email:** [employerservices@wcbask.com](mailto:employerservices@wcbask.com)  
or [premiuminquiry@wcbask.com](mailto:premiuminquiry@wcbask.com)

### Report an injury

**Toll free:** 1.800.787.9288 for **E1** and **W1** initial reports of injury only (WCB Teleservice).

A claims entitlement specialist will complete the report with you over the phone.

Please have your information ready when you call.

**Online:** [www.wcbask.com](http://www.wcbask.com)

**Email:** [forms@wcbask.com](mailto:forms@wcbask.com)

### Claims inquiries and information

**Fax:** 306.787.7582 (Regina)

**Toll free fax:** 1.888.844.7773

**Email:** [askwcb@wcbask.com](mailto:askwcb@wcbask.com)

### Report fraud

Director, Internal Audit  
Saskatchewan Workers' Compensation Board  
200 – 1881 Scarth Street  
Regina SK S4P 4L1

**Phone:** Fraud TIPS line 1.877.595.2541

**Email:** [fraud@wcbask.com](mailto:fraud@wcbask.com)

**Fair Practices Office inquiries**

**Phone:** 306.787.8651 (Regina)

**Toll free:** 1.888.787.8651

**Toll free fax:** 1.866.787.6751

**Email:** [fairpracticeoffice@wcbask.com](mailto:fairpracticeoffice@wcbask.com)

**Online:** [www.wcbask.com/about-wcb/who-we-are/fair-practices-office](http://www.wcbask.com/about-wcb/who-we-are/fair-practices-office)

**Appeal inquiries**

**Phone:** 306.787.4370 (Regina)

**Toll free:** 1.800.667.7590

**Fax:** 306.787.1116 (Regina)

**Email:** [appeals@wcbask.com](mailto:appeals@wcbask.com)

**Online:** [www.wcbask.com/employers/employer-appeals](http://www.wcbask.com/employers/employer-appeals)

**WorkSafe Saskatchewan**

**Phone:** 306.787.4370 (Regina)

**Toll free:** 1.800.667.7590

**Email:** [worksafeinquiry@wcbask.com](mailto:worksafeinquiry@wcbask.com)

**Online:** [www.worksafesask.ca](http://www.worksafesask.ca)

**All other inquiries**

**Employer Resource Centre**

**Toll free:** 1.833.961.0042

**Email:** [ERC@wcbask.com](mailto:ERC@wcbask.com)

## **Provincial government**

### **Ministry of Labour Relations and Workplace Safety – OHS Division**

300 – 1870 Albert Street

Regina SK S4P 4W1

**Toll free:** 1.800.567.SAFE(7233)

**Fax:** 306.787.2208

**Online:** [saskatchewan.ca](http://saskatchewan.ca)

### **Office of the Workers' Advocate**

300 – 1870 Albert Street

Regina SK S4P 4W1

**WCB Appeal Advocate Services:** 1.877.787.2456

**Fax:** 306.787.0249

**Email:** [workersadvocate@gov.sk.ca](mailto:workersadvocate@gov.sk.ca)

**Online:** [saskatchewan.ca/work](http://saskatchewan.ca/work)

## Websites

### The WCB

**Saskatchewan Workers' Compensation Board**

[www.wcbsask.com](http://www.wcbsask.com)

**Saskatchewan Workplace Hazardous Materials Information System (WHMIS)**

[www.worksafesask.ca/training/online-courses/online-whmis-training/](http://www.worksafesask.ca/training/online-courses/online-whmis-training/)

**WorkSafe Saskatchewan**

[www.worksafesask.ca](http://www.worksafesask.ca)

### Provincial government

**Labour Relations and Workplace Safety (LRWS)**

[saskatchewan.ca/work](http://saskatchewan.ca/work)

**Saskatchewan Human Rights Commission**

[www.saskatchewanhumanrights.ca](http://www.saskatchewanhumanrights.ca)

### Federal government

**Canadian Centre for Occupational Health and Safety**

[www.ccohs.ca](http://www.ccohs.ca)

**Canadian Human Rights Commission**

[www.chrc-ccdp.ca](http://www.chrc-ccdp.ca)

**Public Health Agency of Canada**

[www.phac-aspc.gc.ca](http://www.phac-aspc.gc.ca)

**Statistics Canada**

[www.statcan.gc.ca](http://www.statcan.gc.ca)

## **Saskatchewan safety associations**

The Saskatchewan safety associations are non-profit associations of employers in specialized industries. They are funded by the WCB for the purpose of injury prevention, safety and return to work.

**Energy Safety Canada (D32, D41, D51, D52)**

**Heavy Construction Safety Association of Saskatchewan (HCSAS) (R11)**

**Motor Safety Association (MSA) (C61, C62)**

**Safety Association of Saskatchewan Manufacturers (SASM) (M41, M72, M91, M94)**

**Saskatchewan Association for Safe Workplaces in Health (SASWH) (G22)**

**Saskatchewan Construction Safety Association (SCSA) (B11, B12, B13)**

**Service Hospitality (S21, S22, S23)**

See [www.worksafesask.ca/resources/saskatchewan-safety-associations/](http://www.worksafesask.ca/resources/saskatchewan-safety-associations/) for contact information.

## **Additional websites**

### **Association of Workers' Compensation Boards of Canada (AWCBC)**

[www.awcbc.org](http://www.awcbc.org)

### **Workers' Compensation Board of Alberta**

[www.wcb.ab.ca](http://www.wcb.ab.ca)

### **WorkSafeBC**

[www.worksafebc.com](http://www.worksafebc.com)

### **Workers Compensation Board of Manitoba**

[www.wcb.mb.ca](http://www.wcb.mb.ca)

### **WorkSafeNB**

[www.worksafenb.ca](http://www.worksafenb.ca)

### **Workplace Health, Safety and Compensation Commission (Newfoundland and Labrador)**

[workplacenl.ca](http://workplacenl.ca)

### **Workers' Safety and Compensation Commission (Northwest Territories and Nunavut)**

[www.wscn.nt.ca](http://www.wscn.nt.ca)

### **Workers' Compensation Board of Nova Scotia**

[www.wcb.ns.ca](http://www.wcb.ns.ca)

### **Workplace Safety and Insurance Board (Ontario)**

[www.wsib.on.ca](http://www.wsib.on.ca)

### **Workers' Compensation Board of Prince Edward Island**

[www.wcb.pe.ca](http://www.wcb.pe.ca)

### **Commission des normes, de l'équité, de la santé et de la sécurité du travail**

[www.csst.qc.ca](http://www.csst.qc.ca)

### **Yukon Workers' Compensation Health and Safety Board**

[www.wcb.yk.ca](http://www.wcb.yk.ca)

Contact information

**Canadian Centre for Occupational Health and Safety**

[www.ccohs.ca](http://www.ccohs.ca)

**The National Institute for Occupational Safety & Health (NIOSH)**

[www.cdc.gov/niosh](http://www.cdc.gov/niosh)

**National Institute of Disability Management and Research (NIDMAR)**

[www.nidmar.ca](http://www.nidmar.ca)

**North American Occupational Safety and Health Week (NAOSH)**

[www.naosh.org](http://www.naosh.org)

**Canada's Occupational Health & Safety Magazine**

[www.ohscanada.com](http://www.ohscanada.com)





# WORKSAFE SUPPORT

| WORKSAFE SUPPORT



## Prevention services

In addition to OHC and supervisor training, the WCB's Prevention department offers a variety of other safety services at no cost to employers and workers. For more information on these services, visit [www.worksafesask.ca](http://www.worksafesask.ca).

## Classroom courses

For a listing of classroom courses, visit [www.worksafesask.ca/training/classroom-training](http://www.worksafesask.ca/training/classroom-training).

## Online courses

For a listing of online courses, visit [www.worksafesask.ca/training/online-courses](http://www.worksafesask.ca/training/online-courses).

## Contact Prevention

Prevention  
Saskatchewan Workers' Compensation Board  
200 – 1881 Scarth Street  
Regina SK S4P 4L1  
**Phone:** 306.787.4370  
**Toll free:** 1.800.667.7590  
**Email:** [worksafeinquiry@wcbask.com](mailto:worksafeinquiry@wcbask.com)



# APPENDICES

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## **Section 3-20 of *The Saskatchewan Employment Act***

### **Duty to provide occupational health and safety programs**

- (1) An employer at a prescribed place of employment shall establish and maintain an occupational health and safety program or a prescribed part of an occupational health and safety program in accordance with the regulations made pursuant to this Part.
- (2) An occupational health and safety program at a prescribed place of employment must be established and designed in consultation with:
  - (a) the occupational health committee;
  - (b) the occupational health and safety representative; or
  - (c) the workers, if there is no occupational health committee and no occupational health and safety representative.
- (3) An occupational health and safety program must include all prescribed documents, information and matters.
- (4) An occupational health and safety program at a prescribed place of employment must be in writing and must be made available, on request, to the occupational health committee, the occupational health and safety representative, the workers, or an occupational health officer.
- (5) If the work at a place of employment is carried on pursuant to contracts between a contractor and two or more employers, the contractor shall coordinate the occupational health and safety programs of all employers at the place of employment.
- (6) The director of occupational health and safety may order an employer or prime contractor to develop an occupational health and safety program for a place of employment if the director considers it to be in the interests of the health, safety and welfare of the employer's workers based on the criteria set out in subsection (8).
- (7) An order issued pursuant to subsection (6) must be in writing.
- (8) In making an order pursuant to subsection (6), the director of occupational health and safety shall consider the following criteria:
  - (a) the frequency of occupationally related injuries and illnesses at the place of employment;
  - (b) the number and nature of the notices of contravention relating to the place of employment and the history of compliance with those orders and with compliance undertakings; and
  - (c) any additional criteria that the director considers appropriate to protect the health, safety and welfare of workers.

## **Regulation 22 of *The Saskatchewan Occupational Health and Safety Regulations, 2020***

### **Occupational health and safety program**

- (1) Subject to subsection (2), an occupational health and safety program required by section 13 of the Act must include:
- (a) a statement of the employer's policy with respect to the protection and maintenance of the health and safety of the workers;
  - (b) the identification of existing and potential risks to the health or safety of workers at the place of employment and the measures, including procedures to respond to an emergency, that will be taken to reduce, eliminate or control those risks;
  - (c) the identification of internal and external resources, including personnel and equipment, that may be required to respond to an emergency;
  - (d) a statement of the responsibilities of the employer, the supervisors and the workers;
  - (e) a schedule for the regular inspection of the place of employment and of work processes and procedures;
  - (f) a plan for the control of any biological or chemical substance handled, used, stored, produced or disposed of at the place of employment and, where appropriate, the monitoring of the work environment;
  - (g) a plan for training workers and supervisors in safe work practices and procedures, including any procedures, plans, policies or programs that the employer is required to develop pursuant to the Act or any regulations made pursuant to the Act that apply to the work of the workers and supervisors;
  - (h) a procedure for the investigation of accidents, dangerous occurrences and refusals to work pursuant to section 23 of the Act at the place of employment;
  - (i) a strategy for worker participation in occupational health and safety activities, including audit inspections and investigations of accidents, dangerous occurrences and refusals to work pursuant to section 23 of the Act; and
  - (j) a procedure to review and, where necessary, revise the occupational health and safety program at specified intervals that are not greater than three years and whenever there is a change of circumstances that may affect the health or safety of workers.



- (2) On and after January 1, 1998, the places of employment set out in Table 7 of the Appendix with 10 or more workers are prescribed for the purposes of section 13 of the Act.
- (3) An employer at a place of employment mentioned in subsection (2) shall establish an occupational health and safety program that meets the requirements of subsection (1) not later than:
  - (a) in a place of employment with 100 or more workers, January 1, 1998;
  - (b) in a place of employment with 21 or more workers but not more than 99 workers, January 1, 1999; and
  - (c) in a place of employment with 10 or more workers but not more than 20 workers, January 1, 2000.

## **Regulation 29 of *The Saskatchewan Occupational Health and Safety Regulations, 2020***

### **Investigation of certain accidents**

- (1) Subject to section 30, an employer shall ensure that every accident that causes or may cause the death of a worker or that requires a worker to be admitted to a hospital as an in-patient for a period of 24 hours or more is investigated as soon as is reasonably possible by:
  - (a) the co-chairpersons or their designates;
  - (b) the employer and the representative; or
  - (c) where there is no committee or representative, the employer.
  
- (2) After the investigation of an accident, an employer, in consultation with the co-chairpersons or their designates, or with the representative, shall prepare a written report that includes:
  - (a) a description of the accident;
  - (b) any graphics, photographs or other evidence that may assist in determining the cause or causes of the accident;
  - (c) an explanation of the cause or causes of the accident;
  - (d) the immediate corrective action taken; and
  - (e) any long-term action that will be taken to prevent the occurrence of a similar accident or the reasons for not taking action.

## **Regulation 30 of *The Saskatchewan Occupational Health and Safety Regulations, 2020***

### **Prohibition re scene of accident**

- (1) Unless expressly authorized by statute or by subsection (2), no person shall, except for the purpose of saving life or relieving human suffering, interfere with, destroy, carry away or alter the position of any wreckage, article, document or thing at the scene of or connected with an accident causing a death until an officer has completed an investigation of the circumstances surrounding the accident.
- (2) Where an accident causing a death occurs and an officer is not able to complete an investigation of the circumstances surrounding the accident, an officer may, unless prohibited by statute, grant permission to move the wreckage, articles and things at the scene or connected with the accident to any extent that may be necessary to allow the work to proceed, if:
  - (a) graphics, photographs or other evidence showing details at the scene of the accident are made before the officer grants permission; and
  - (b) the co-chairpersons of a committee or the representative for the place of employment at which the accident occurred or their designates have inspected the site of the accident and agreed that the wreckage, article or thing may be moved.

## **Regulation 31 of *The Saskatchewan Occupational Health and Safety Regulations, 2020***

### **Investigation of dangerous occurrences**

- (1) An employer, contractor or owner shall ensure that every dangerous occurrence described in subsection 9(1) is investigated as soon as is reasonably possible by:
  - (a) the co-chairpersons or their designates;
  - (b) the employer, contractor or owner and the representative; or
  - (c) where there is no committee or representative, the employer, contractor or owner.
  
- (2) After the investigation of a dangerous occurrence, an employer, contractor or owner, in consultation with the co-chairpersons or their designates or with the representative, shall prepare a written report that includes:
  - (a) a description of the dangerous occurrence;
  - (b) any graphics, photographs or other evidence that may assist in determining the cause or causes of the dangerous occurrence;
  - (c) an explanation of the cause or causes of the dangerous occurrence;
  - (d) the immediate corrective action taken; and
  - (e) any long-term action that will be taken to prevent the occurrence of a similar dangerous occurrence or the reasons for not taking action.

**Table 7 in the Appendix of *The Saskatchewan Occupational Health and Safety Regulations, 2020***

**Prescribed places of employment**

1. Types of places of employment:

- (a) hospitals, nursing homes and home care;
- (b) metal foundries and mills; and
- (c) mines.

2. Places of employment at which the following types of work are performed:

- (a) aerial crop spraying, operation of helicopters, water bombing;
- (b) autobody and automotive paint repairing, bumper electroplating, auto rust proofing, auto glass installation, auto vinyl roofing, fibre-glassing boats and autos;
- (c) building construction;
- (d) camp catering;
- (e) farming and ranching;
- (f) forestry work other than pulp and paper production;
- (g) forwarding and warehousing as a business;
- (h) metal manufacturing and machining, marble works, concrete block and ready mix manufacturing;
- (i) oilwell servicing;
- (j) oil and gas drilling, well servicing with a rig, water well drilling;
- (k) processing meat, poultry and fish;
- (l) road construction and earthwork, urban sewer and water construction, tunnelling;
- (m) trucking; and
- (n) wholesale baking, dairy products, soft drinks and food preparation and packaging.





**Head office**  
200 -1881 Scarth Street  
Regina SK S4P 4L1

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800 – 122 1st Ave. S.  
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**Toll free:** 1.800.667.7590  
**Fax:** 306.787.4311  
**Toll free fax:** 1.888.844.7773  
**Online:** [www.wcbsask.com](http://www.wcbsask.com)

