Saskatchewan Workers' Compensation Board

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Employer: Why your worker's work schedule is important and how to report it

The Saskatchewan Workers' Compensation Board (WCB) requires wage information from an injured worker's employer to provide earnings loss (also called wage-loss) benefits (PRO 06/2016). We use a worker's wage base to calculate all earnings loss payments. The information an employer provides can impact the amount the injured worker receives for the time lost from work for their injury. The WCB pays earnings loss benefits based on the schedule at the time of first earnings loss.

To calculate the wage benefit for an injured worker, we need the following information:

- The regular rate of pay earned by the worker at the start of earnings loss.
- The number of days in the worker's work week.
- The gross average of the worker's earnings before the start of earnings loss.
- The periods the worker was unavailable to work.
- The worker's probable deductions for income tax, Canada Pension Plan (CPP) premiums and Employment Insurance (EI) premiums.

Worker's work week

The worker's work week at the time of injury is important because we use this schedule to pay the injured worker their earnings loss benefits. We pay based on a regular schedule and a daily rate. A regular schedule is when the worker's days off are consistent from week-to-week or there is a set rotation of days off over a period of weeks. In addition, if your worker has a set schedule (basis of hire) you need to let us know the schedule.

> **Wage example:** If the injured worker has one day of time loss on a seven-day work week and the weekly wage is $700, the injured worker would receive $100. If the injured worker has one day of time loss on a five-day work week and the weekly wage is $700, the injured worker would receive $140.

> **Schedule example**: A regular schedule is when the worker's days off are consistent from week to week or there is a set rotation of days off over a period of weeks. For example, the basis of hire is full time working Monday to Friday, rest days are Saturday and Sunday. The hours of work are eight-hour days or 40 hours per week at $15/hour.

The following pages contain frequently asked questions and examples to help complete the schedule information found on the Employer's Report of Injury (E1) form.

If you need assistance completing your E1 form, contact us:

Phone: 1.800.667.7590
Email: askwcb@wcbsask.com

Updated: 01/21

Employer's Initial Report of Injury (E1) form – Work schedule information questions and answers

This how-to-document is to help you complete the work schedule information section on the [Employer's Initial Report of Injury (E1)](#) form.

Q: How do I fill out the calendar for a regular work schedule?

A: We only need to see the regular days off indicated on the calendar. For example, if Sally works Monday to Friday and always has Saturdays and Sundays off, you would mark Saturday and Sunday in question 15 of the E1.

15. Does the worker have regular days off? ☒ Yes ☐ No If "yes," mark which days off: S☒ Mon Tue Wed Thu Fri S☒
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

However, if Sally has an irregular work schedule and works four days a week and always gets three days off, but the days off vary from week to week, you would enter the months and the days she had off during those months it on question 15 of the E1.

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

Q: How do I record earned days off (EDOs) in the E1?

A: To record an EDO on the E1 form, in the field for the month of injury, write, "EDO is every second Friday" or "EDO is every third Friday." Provide the **date of the worker's last EDO**. Please remember to mark the regular days off like Saturday and Sunday. There is no need to fill out the whole calendar.

15. Does the worker have regular days off? ☐ Yes ☐ No If "yes," mark which days off: S☒ Mon Tue Wed Thu Fri S☒
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.

EDO every 2nd Friday	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
Last EDO October 2	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

Q: How do I record rotations on the E1 form?

A: A rotation is when the worker works the same pattern of days within a specific number of weeks. There are two types of rotations – a master rotation and an actual rotation.

A master rotation – What was the rotation that the worker was hired to do or what rotation is the worker currently on? This is usually produced by the scheduling department.

An actual rotation – This takes into account switching shifts, traded shifts, picking up shifts, overtime, training days, meeting days, vacation days, etc. This is usually produced by the payroll department.

To help us provide earnings loss benefits, we need the established rotation at the time of the first earnings loss.

Common rotation examples:

- Starting Feb. 6, five on, four off; repeating every nine days.

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	Days
February 2020 leap year	1 ✗ ✗ ✗ ✗ 6 7 8 9 10 ✗ ✗ ✗ ✗ 15 16 17 18 19 ✗ ✗ ✗ ✗ 24 25 26 27 28 ✗ 30 31
March 2020	✗ ✗ ✗ 4 5 6 7 8 ✗ ✗ ✗ ✗ 13 14 15 16 17 ✗ ✗ ✗ ✗ 22 23 24 25 ✗ ✗ ✗ ✗ ✗ 31
January 2020	1 2 3 4 5 ✗ ✗ ✗ ✗ 10 11 12 13 14 ✗ ✗ ✗ ✗ 19 20 21 22 23 ✗ ✗ ✗ ✗ 28 29 30 31

16. TD1 exemptions: ☐ Single   ☐ Spouse, if partial   Provincial amount $ Federal amount $

- Starting Feb. 8, four on, five off; five on four off; five on five off; repeating every 28 days.

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	Days
February 2020 leap year	1 2 ✗ ✗ ✗ ✗ ✗ ✗ 8 9 10 11 ✗ ✗ ✗ ✗ ✗ 17 18 19 20 21 ✗ ✗ ✗ ✗ 26 27 28 29 30 31
March 2020	1 ✗ ✗ ✗ ✗ ✗ 7 8 9 10 ✗ ✗ ✗ ✗ ✗ 16 17 18 19 20 ✗ ✗ ✗ ✗ 25 26 27 28 29 ✗ ✗
January 2020	1 2 3 4 5 ✗ ✗ ✗ ✗ ✗ 11 12 13 14 ✗ ✗ ✗ ✗ ✗ 20 21 22 23 24 ✗ ✗ ✗ ✗ 29 30 31

- Starting Feb. 12, 10 on, four off; repeating every 14 days.

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	Days
February 2020 leap year	1 2 3 4 5 6 7 ✗ ✗ ✗ ✗ 12 13 14 15 16 17 18 19 20 21 ✗ ✗ ✗ ✗ 26 27 28 29 30 31
March 2020	1 2 3 4 5 6 ✗ ✗ ✗ ✗ 11 12 13 14 15 16 17 18 19 20 ✗ ✗ ✗ ✗ 25 26 27 28 29 30 31
January 2020	1 2 3 4 5 6 7 8 9 10 ✗ ✗ ✗ ✗ 15 16 17 18 19 20 21 22 23 24 ✗ ✗ ✗ ✗ 29 30 31

- Starting Feb. 1, seven on, four off; seven on three off; repeating every 21 days.

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	Days
February 2020 leap year	1 2 3 4 5 6 7 ✗ ✗ ✗ ✗ 12 13 14 15 16 17 18 ✗ ✗ ✗ 22 23 24 25 26 27 28 ✗ 30 31
March 2020	✗ ✗ ✗ 4 5 6 7 8 9 10 ✗ ✗ ✗ 14 15 16 17 18 19 20 ✗ ✗ ✗ ✗ 25 26 27 28 29 30 31
January 2020	1 2 3 4 5 6 7 ✗ ✗ ✗ ✗ 11 12 13 14 15 16 17 ✗ ✗ ✗ ✗ 22 23 24 25 26 27 28 ✗ ✗ ✗

16. TD1 exemptions: ☐ Single   ☐ Spouse, if partial   Provincial amount $ Federal amount $

- Starting Jan. 1, 21 on, seven off; repeating every 28 days.

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	Days
February 2020 leap year	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 ✗ ✗ ✗ ✗ ✗ ✗ ✗ 26 27 28 29 30 31
March 2020	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 ✗ ✗ ✗ ✗ ✗ ✗ ✗ 25 26 27 28 29 30 31
January 2020	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 ✗ ✗ ✗ ✗ ✗ ✗ ✗ 29 30 31

- Starting Feb. 10, two on, three off; two on two off; two on, three off; two on, three off; four on, five off (13 shifts in 28 days).

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	Days
February 2020 leap year	1 2 3 4 ✗ ✗ ✗ ✗ ✗ ✗ 10 11 ✗ ✗ ✗ 15 16 ✗ ✗ 19 20 ✗ ✗ ✗ 24 25 ✗ ✗ ✗ 29 30 31
March 2020	1 2 3 ✗ ✗ ✗ ✗ ✗ 9 10 ✗ ✗ ✗ 14 15 ✗ ✗ 18 19 ✗ ✗ ✗ 23 24 ✗ ✗ ✗ 28 29 30 31
January 2020	✗ ✗ ✗ 4 5 6 7 ✗ ✗ ✗ ✗ ✗ 13 14 ✗ ✗ ✗ 18 19 ✗ ✗ 22 23 ✗ ✗ ✗ 27 28 ✗ ✗ ✗

Q: What if the rotation doesn't fit on the E1?

A: You can complete a calendar form found on our website and mark the days off. You can email the completed calendar to forms@wcbsask.com.

Q: If my worker has the same number of days off each week but they vary, what do I put on the E1 form? For example, what do I do if a worker always has two days off every week, but those days are not the same from week to week?

A: When a worker has different days off every week, we need the following information:

1. On question 13 on the E1 form, select "d". In the explanation field, put that the worker has "regular but varied days off".

13. Time lost during the gross earnings period due to: (a) Unpaid sickness: ___ (b) Prior WCB claims ___ days; (c) Lack of work: ___ days;
    (d) Other ___ days (Explain): Has 2 days off each week, but they vary

2. Please fill out what the worker's actual days off are on the three-month calendar.

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.

September	1 ✗ ✗ 4 5 6 7 ✗ ✗ 10 11 12 13 ✗ 15 ✗ 17 18 19 20 21 ✗ ✗ 24 25 26 ✗ ✗ 29 30 31
October	1 2 3 4 5 ✗ ✗ 8 9 10 11 12 13 14 15 ✗ ✗ 18 19 20 ✗ ✗ 23 24 25 ✗ ✗ 28 29 30 31
August	1 2 3 ✗ ✗ 6 7 8 9 10 11 12 ✗ ✗ 15 16 17 ✗ ✗ 20 21 22 23 ✗ ✗ 26 27 28 29 30 31

Q: What if there is no set schedule or no regular days off?

A: In the "month of injury period" field, indicate that the worker can work any one of seven days.

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.

Can work any 1 of 7 days.	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

Q: My worker's work schedule has changed. Which schedule do I put on the E1 form?
A: When you are completing your E1, we need to know the schedule the worker was working. When they start to lose time from work because of their injury. When a worker is injured, some employers switch their schedule to accommodate a return-to-work program. If a worker experiences misses work because of the work injury after their schedule has been switched, please report the new schedule.

Q: I am self-employed, how do I figure out what my work week is?

A: Most self-employed people are available to work seven days a week. However, if you only work Monday to Friday, you would indicate that on the E1 form.