



The **Saskatchewan** Workers' Compensation Board

Psychological injury policies

overview and scenarios

Workers' compensation insurance is a provincial responsibility. Each Canadian province and territory has its own workers' compensation legislation. The Saskatchewan Workers' Compensation Board (WCB) operates like an insurance company. We provide guaranteed benefits and programs to injured workers in industries covered by *The Workers' Compensation Act, 2013* and we protect registered employers from lawsuits when a workplace injury happens.





Table of contents

Overview	4	Scenario 3: Multiple work events	14
POL/PRO 11/2025 – Psychological Injuries – Psychological Injury Presumption		Scenario 4: Non-work stressors	14
Section 28.1, The Workers’ Compensation Act, 2013.....	6	Scenarios – denied claims	15
POL/PRO 12/2025 – Psychological Injuries – General Injury Presumption		Scenario 1: Pre-existing condition dominates	15
Section 27, The Workers’ Compensation Act, 2013.....	8	Scenario 2: Non-work trauma is primary.....	15
Key aspects of WCB psychological injury coverage	10	Scenario 3: Minimal impact compared to other causes	16
What is covered	11	Scenario 4: Pre-existing psychological condition progresses naturally.....	16
What is not covered.....	11	Guidance for reconsiderations.....	17
Requirements for a claim.....	12	Flow chart for decision-making.....	18
Benefits and treatment	12	Recovery and return-to-work planning.....	19
Process	12	Resources	19
Scenarios – accepted claims	13	Glossary of terms	19
Scenario 1: Mixed causes – physical and psychological	13		
Scenario 2: Pre-existing condition with aggravation.....	13		

Overview

At the Saskatchewan Workers' Compensation Board (WCB), we recognize that psychological health is an important part of workplace safety. Psychological injuries can happen when someone experiences a traumatic event or a series of events at work or is impacted by significant work-related stressors, such as bullying or harassment.

Our policies are designed to ensure that when a worker's psychological health is affected by their job, they receive fair, timely and compassionate support. In some situations, such as when a diagnosed psychological injury follows a traumatic work event, the injury may be presumed to be work-related. In other cases, we look closely at the worker's experience and the events in the workplace to understand whether work played a meaningful role.

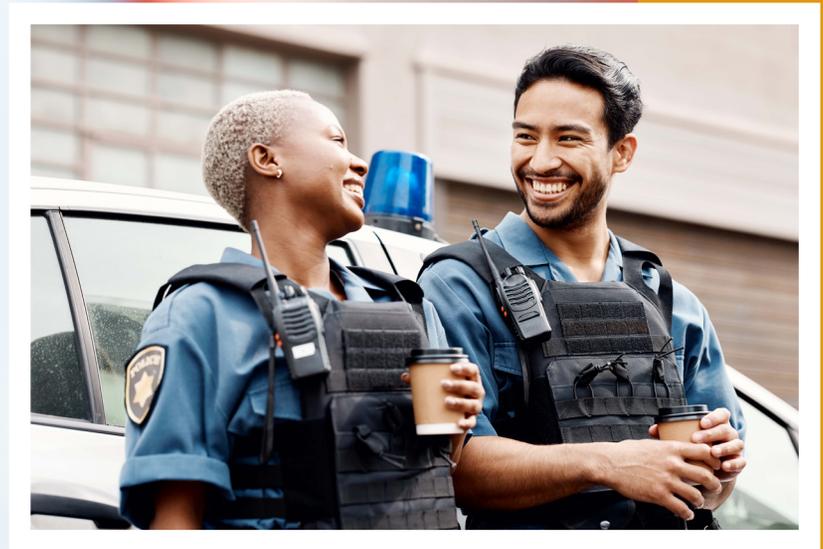
Our goal is simple: to make the process clear, supportive and focused on helping workers get the care, stability and recovery they need.

The Saskatchewan WCB recognizes psychological injuries under a rebuttable presumption model (Section 28.1). This means that if a worker is diagnosed with a psychological injury after a traumatic event at work, the injury is presumed to have arisen from employment unless proven otherwise.

For those who do not meet the presumption criteria under Section 28.1, the WCB will consider the general arising out of and in the course of employment presumption.

The primary policies governing these claims are POL 11/2025¹ (Psychological Injury Presumption) and POL 12/2025 (General Injury Presumption).

¹For policy 11, there must be a licensed psychologist or psychiatrist and for policy 12, they must hold an authorized practice endorsement (APE).



There are two policies that can apply to a psychological injury in Saskatchewan:

1. Psychological Injury Presumption – Policy 11/2025 (*The Workers' Compensation Act, 2013, Section 28.1*)

- Applies when a worker experiences a traumatic work-related event or series of events and receives a DSM-based diagnosis from a psychologist or psychiatrist. In these cases, the injury is presumed to be work-related unless strong evidence shows otherwise, making it easier and faster for workers to access support.

2. General Injury Presumption – Policy 12/2025 (*The Workers' Compensation Act, 2013, Section 27*)

- Applies when the criteria for the psychological presumption are not met. For example, when the diagnosis is from another professional, when substantial work-related stressors are involved or when no traumatic event occurred. These claims are assessed using the balance of probabilities and the material significance test to determine whether work meaningfully contributed to the psychological injury.

POL/PRO 11/2025: Psychological Injuries

– Psychological Injury Presumption Section 28.1, *The Workers' Compensation Act, 2013*

Psychological Injuries – Psychological Injury Presumption (Section 28.1)

Document number – POL 11/2025² – Effective date: May 1, 2025

Application: Applies to psychological injuries reported to the WCB on or after the effective date.

Applies to reconsiderations of psychological injury claim decisions made on or after December 20, 2016.

Policy subject: Decision making - Injuries

Purpose – To establish adjudication guidelines for psychological injury claims that meet the legislated psychological injury presumption.



DEFINITIONS

Accredited health-care provider means a provider who has applied for accreditation with the WCB and, following review of their credentials, the WCB accepts their request for accreditation. Once accreditation is in place, the accredited health-care provider can bill the WCB directly for services provided to workers.

DSM means the Diagnostic and Statistical Manual of Mental Disorders (DSM) published by the American Psychiatric Association to help psychological health providers diagnose psychological health disorders. The fifth edition (DSM-5) is to be used as prescribed by *The Workers' Compensation Miscellaneous Regulations*. The DSM does not include guidelines for the treatment of a disorder.

DSM diagnosis, for the purpose of this policy, means a diagnosis that meets all diagnostic criteria for a disorder in accordance with the DSM, completed by a psychologist or psychiatrist licensed to practice and make diagnoses.

Psychological health assessment is a psychological evaluation completed by a WCB accredited psychologist or psychiatrist and includes:

- An assessment and diagnosis of a disorder, or confirmation of a diagnosis, in accordance with the DSM,
- Recommended treatment, and
- Recommended return-to-work planning.

Psychological injury means a psychological disorder or condition that meets the DSM diagnostic criteria (for example, acute stress disorder or post-traumatic stress disorder) and has arisen, or is presumed to have arisen, out of and in the course of employment (Section 28.1(1)(a)).

Traumatic work-related event(s) means exposure through direct personal experience or being a direct personal witness to an event, or series of events, arising out of and in the course of employment that may give rise to a psychological injury, including:

- Actual or threatened death or serious injury to a worker or others,
- Event(s) that are sudden and typically unexpected, occurring at a specific time and place, or
- Event(s) that would be objectively considered emotionally shocking or horrific (that is, physical or sexual violence).

²For policy 11, there must be a licensed psychologist or psychiatrist and for policy 12, they must hold an authorized practice endorsement (APE).

POL/PRO 12/2025: Psychological Injuries

– General Injury Presumption Section 27, *The Workers' Compensation Act, 2013*

Psychological Injuries – General Injury Presumption (Section 27)

POL 12/2025 – Effective date: May 1, 2025

Application: Applies to psychological injuries sustained on or after the effective date.

Policy subject: Decision making - Injuries

Purpose – To establish adjudication guidelines for psychological injury claims that do not meet the legislated psychological injury presumption.

DEFINITIONS

Accredited health-care provider means a provider who has applied for accreditation with the WCB and, following review of their credentials, the WCB accepts their request for accreditation. Once accreditation is in place, the accredited health-care provider can bill the WCB directly for services provided to workers.

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Standard of proof means the level of certainty required to prove an issue that is in question. For the WCB, the standard of proof is whether a specific conclusion is more likely than not.

Substantial work-related stressor means an event, or series of events, that has arisen out of and in the course of employment that may give rise to a psychological injury. A work-related stressor will generally be considered substantial if it is excessive in intensity and/or duration in comparison to the normal pressures and tensions experienced by workers in similar work situations. The following circumstances would generally be considered substantial work-related stressors:

- Discrimination or harassment based on prohibited grounds as defined by *The Saskatchewan Human Rights Code, 2018* (for example, religion, creed, marital status, family status, sex, sexual orientation, disability, age, colour, ancestry, nationality, place of origin, race or perceived race, and receipt of public assistance) or physical weight or size.
- Bullying or personal harassment, which is a repeated or single serious or severe incident of aggressive or threatening conduct, comment, display, action or gesture by a person toward a worker, with an intent to harm, exclude, threaten, humiliate or intimidate.
- Sexual harassment, which means conduct, comment, display, action or gesture of a sexual nature.
- Excessive and long-standing workload issues that would be objectively considered beyond the normal pressures and tensions experienced within employment and constitute a threat or a lasting harmful effect to a worker's health or safety.

Traumatic work-related event(s) means exposure through direct personal experience or being a direct personal witness to an event, or series of events, arising out of and in the course of employment that may give rise to a psychological injury, including:

- Actual or threatened death or serious injury to a worker or others,
- Event(s) that are sudden and typically unexpected, occurring at a specific time and place, or
- Event(s) that would be objectively considered emotionally shocking or horrific (that is, physical or sexual violence).

Key aspects

of WCB psychological injury coverage

DEFINITION OF INJURY:

Covers psychological injuries arising from direct exposure to a traumatic event, a series of traumatic events or significant, excessive, work-related stress.



PRESUMPTION RULE:

If a worker has been diagnosed with a psychological disorder, like PTSD, the diagnosis was provided by a psychologist or psychiatrist, and they were exposed to a traumatic event at work, the injury is presumed to have arisen from their employment.



In Saskatchewan, the WCB covers psychological injuries arising from “substantial work-related stressors,” which include excessive and long-standing workload issues that go beyond the normal, day-to-day pressures of a job such as bullying, harassment or discrimination. **To be covered, the workload must be objectively considered a threat or a cause of lasting harmful effect to a worker’s health or safety.**

WHAT IS COVERED

Acute reactions to traumatic events (for example, witnessing a death, violence or severe accident).

- Chronic stress arising from harassment, discrimination, bullying, sexual harassment or excessive workload.
- Pre-existing conditions do not disqualify a claim if the workplace event had a material contribution, though the WCB does not cover the treatment of the pre-existing condition itself.

The WCB considers these factors when determining if workload pressures qualify as a compensable injury:

- **Prolonged and unusually excessive** – The workload must be intense in duration and intensity, rather than temporary, normal seasonal fluctuations or standard, fast-paced work environments.
- **Substantial differences from peers** – The workload is significantly higher than that of co-workers in similar positions.
- **Beyond normal scope** – Tasks that exceed the normal scope of maintaining employment (for example, being forced to do the job of three people for an extended period).
- **Failure to mitigate** – The employer has not taken steps to reduce the excessive workload or attempts to reduce it have failed.
- **Dangerous workload** – Situations where the workload creates a direct risk to the physical or mental safety of the worker.

WHAT IS NOT COVERED

The WCB does not cover stress resulting from the normal expectations of employment, which includes:

- Standard timeline pressures and deadlines.
- Typical, periodic fluctuations in work volume.
- General workplace culture or atmosphere.
- General disagreements between employees.
- Stress caused by normal, reasonable and routine employment management actions (for example, performance management, layoffs, restructuring, work changes).





Requirements for a claim

For a workload-related psychological injury to be accepted, the worker must generally:

- **Receive a diagnosis:** Have a formal diagnosis from a psychologist, psychiatrist or someone with the APE designation confirming a psychological health disorder (for example, burnout that meets DSM-5 criteria).
- **Provide evidence:** Document that the workload was objectively excessive (for example, hours worked, tasks assigned, communications with management).
 - a. Psychological injuries are often complex and may involve multiple contributing factors. When there are work-related and non-work-related factors that contribute to a psychological injury, the work-related contribution must be of material significance in the occurrence of the injury, meaning more than a trivial or insignificant aspect of the injury or disease.
 - b. The work-related contribution does not need to be the only cause or the dominant cause of the worker's injury. Rather, the work-related factors must have contributed in a meaningful way for the psychological injury to be accepted.
 - c. When there are work-related and non-work-related factors and it is not clear whether the work-related factors are more than a trivial or insignificant aspect of the worker's psychological symptoms, operations staff may use the "but for" test to determine causation.
- **Establish a link:** Demonstrate that the workload pressures more likely than not contributed to or caused a psychological injury that arose out of and in the course of employment.

Benefits and treatment

If a claim is accepted, benefits may include coverage for counselling, psychology services, psychiatric care, medication, hospitalization, inpatient or outpatient psychological health programs, travel and, if needed, loss of earnings benefits.

Process

Claims should be reported immediately. The WCB may provide coverage for treatment while the claim is being adjudicated. For detailed policy, refer to the Psychological Injury Presumption (Section 28.1) (POL 11/2025³) and Psychological Injuries – General Injury Presumption (Section 27) (POL 12/2025) pages WCB's website at wcbask.com.

³For policy 11, there must be a licensed psychologist or psychiatrist and for policy 12, they must hold an authorized practice endorsement (APE).

Scenarios:

accepted claims

These WCB scenarios illustrate the “but for” test staff use to determine claim eligibility under the WCB’s psychological injury policies when there are multiple factors contributing to a worker’s psychological condition. These examples demonstrate how customer care facilitators use professional judgment to decide if a workplace event was a materially significant cause of an injury, considering factors like pre-existing conditions or outside stressors.

These scenarios are examples of claim acceptance when there are multiple factors contributing to the psychological symptoms.

Scenario 1: Mixed causes – physical and psychological

A worker develops PTSD after a workplace robbery, but also has a history of childhood trauma. They also suffered a physical injury, which they are on track to recover from with their treatment plan.

- **Question:** But for the workplace robbery, would the PTSD have occurred?
- **Analysis:** The worker had prior trauma, but symptoms were stable before the robbery. The robbery triggered severe PTSD symptoms.
- **Answer:** No. Without the robbery, the PTSD would not have escalated to this level.
- **Result:** Work event is materially significant → claim may be accepted.

Scenario 2: Pre-existing condition with aggravation

A worker with chronic depression experiences bullying at work, leading to hospitalization.

- **Question:** But for the bullying at work, would hospitalization have occurred?
- **Analysis:** Depression existed, but bullying caused significant worsening requiring medical intervention.
- **Answer:** No. Hospitalization was directly linked to bullying.
- **Result:** Work event materially contributed → claim may be accepted (even if not sole cause).

Disclaimer: Each individual claim is unique and multiple factors need to be reviewed to assess circumstances using the professional judgement of our customer care facilitators. These are for illustration only.

Scenario 3: Multiple work events

A worker experiences two events:

- Event 1: The worker has a minor verbal conflict with a coworker over a favourite hockey team.
- Event 2: The worker witnesses a fatal accident at work.

The worker is later diagnosed with severe anxiety.

- **Question:** But for these work events, would anxiety have occurred?
- **Analysis:** The fatal accident is clearly significant. Verbal conflict alone is unlikely to cause severe anxiety.
- **Answer:** No. Without the accident, the injury likely wouldn't have occurred.
- **Result:** Fatal accident is the materially significant cause → claim accepted. The WCB would accept the claim from the fatal accident onward in this case, but would not provide coverage for treatment or earnings loss prior to the accident.

Scenario 4: Non-work stressors

A worker faces divorce and financial stress at home and then experiences a traumatic work event.

- **Question:** But for the traumatic work event, would a psychological injury have occurred?
- **Analysis:** Non-work stressors were present, but symptoms became disabling only after the work trauma.
- **Answer:** No. The work event was a necessary trigger.
- **Result:** Claim may be accepted despite other contributors.



Disclaimer: Each individual claim is unique and multiple factors need to be reviewed to assess circumstances using the professional judgement of our customer care facilitators. These are for illustration only.

Scenarios:

denied claims

These WCB scenarios illustrate the “but for” test staff use to determine claim eligibility under the WCB’s psychological injury policies when there are multiple factors contributing to a worker’s psychological condition. These examples demonstrate how customer care facilitators use professional judgment to decide if a workplace event was a materially significant cause of an injury, considering factors like pre-existing conditions or outside stressors.

These scenarios are examples of claim denial when there are multiple factors contributing to the psychological symptoms. In these denied scenarios, the WCB could not establish the presence of a traumatic event or a substantial work-related stressor.

Scenario 1: Pre-existing condition and a minor disagreement

A worker has had severe depression for years and is under continuous treatment. They experience a minor disagreement at work and later claim a psychological injury. There is no medical evidence showing that the level of depression changed following the disagreement at work (that is, no increase in medications or treatment).

- **Question:** But for the work disagreement, would the depression continue?
- **Answer:** Yes. The condition was severe and ongoing regardless of the event.
- **Result:** Work event is not materially significant → claim likely denied.

Scenario 2: Non-work trauma and a stressful meeting

A worker is in a serious car accident outside of work, causing PTSD. A week later, they have a stressful meeting at work and claim the meeting caused their psychological condition.

- **Question:** But for the work meeting, would PTSD have occurred?
- **Answer:** Yes. PTSD was already caused by a car accident.
- **Result:** Work event is not materially significant → claim likely denied.

Disclaimer: Each individual claim is unique and multiple factors need to be reviewed to assess circumstances using the professional judgement of our customer care facilitators. These are for illustration only.

Scenario 3: Minimal impact compared to other causes

A worker receives occasional lighthearted comments about their choice of sports team at work, but is simultaneously coping with a major family crisis (for example, death of a loved one). They develop severe anxiety.

- **Question:** But for the teasing, would anxiety have occurred?
- **Answer:** Yes. The family crisis was a significant cause.
- **Result:** Work event is not materially significant → claim likely denied.

Scenario 4: Pre-existing psychological condition progresses naturally

A worker has a long history of severe generalized anxiety disorder and major depression, with multiple hospitalizations before the claim. They experience a minor scheduling conflict at work and later claim this caused their psychological injury.

- **Question:** But for the scheduling conflict, would the psychological condition have worsened?
- **Answer:** Yes. Medical evidence shows the condition was already deteriorating and would have worsened regardless of the work event.
- **Result:** The work event is not materially significant → claim likely denied.



Guidance for reconsiderations

Using 2025 psychological injury policies

A worker may ask the WCB to reconsider any decision when new information is available.

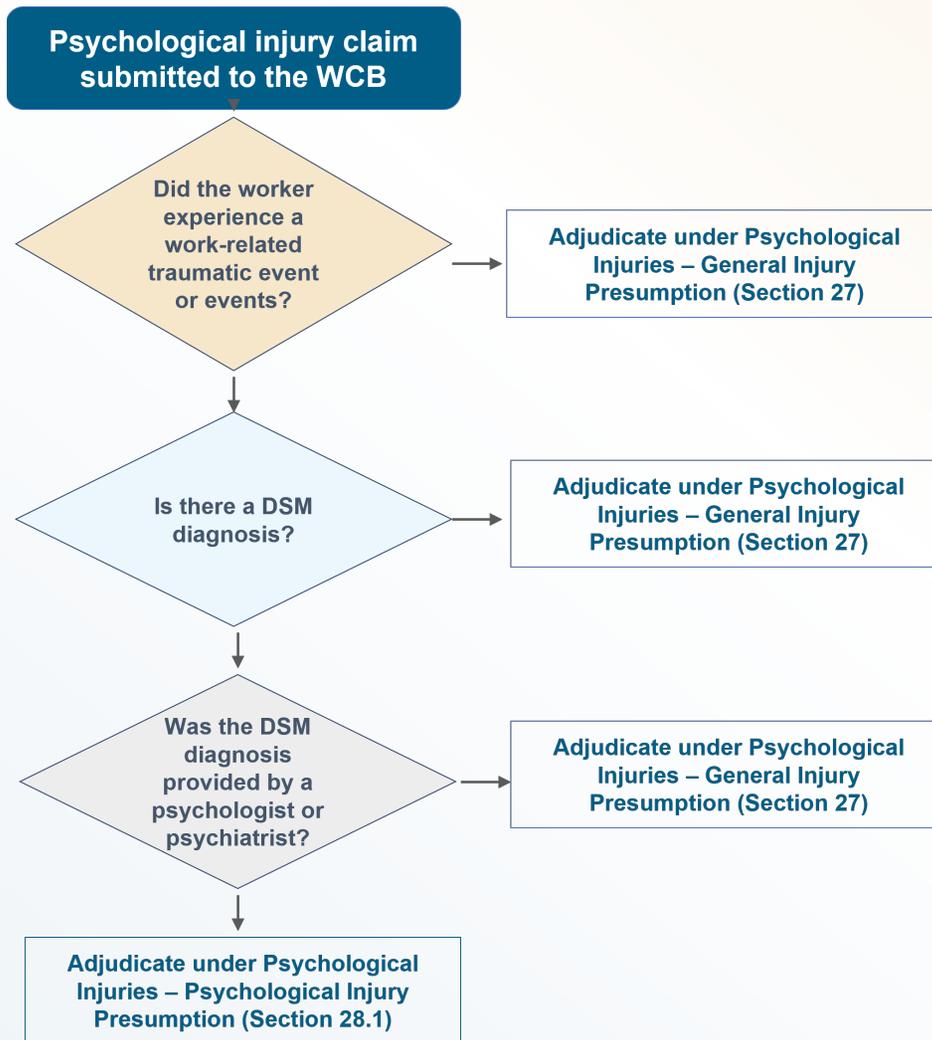
A worker may also ask the WCB to reconsider a psychological injury claim decision made after Dec. 20, 2016, under the new May 2025 policies (POL 11/2025⁴ and POL 12/2025) in these circumstances:

- **There is new evidence that was not available at the time of the previous decision,**
- **The claim was previously denied due to the predominant cause test referenced in POL 02/2017, or**
- **The claim was previously denied without consideration of the claim under Section 27 (general injury presumption) of the Act and the accompanying POL 12/2025.**



⁴For policy 11, there must be a licensed psychologist or psychiatrist and for policy 12, they must hold an authorized practice endorsement (APE).

Flow chart for decision-making



1. Did the worker experience a traumatic event or series of events?
2. Is there a DSM diagnosis?
3. Was the diagnosis provided by a psychologist or psychiatrist?
4. **No to ANY** = use Section 27
5. **Yes to ALL** = use Section 28.1



Recovery and return-to-work planning

At the Saskatchewan WCB, we are committed to working with workers, employers and health-care professionals to collaboratively plan recovery and return to work.

Research strongly supports staying connected to work while recovering from a psychological injury as an important part of recovery. Evidence shows that remaining engaged with the workplace, whether through modified duties, reduced hours or regular communication, helps maintain routine, social connection and a sense of purpose, all of which support psychological health and reduce distress.

Research also highlights that work-connected interventions improve recovery outcomes by supporting identity, confidence and functional coping, leading to earlier and more sustainable return-to-work outcomes for people with psychological injuries.

Additionally, the World Health Organization notes that work provides structure, community and stability, all of which can contribute positively to recovery for individuals with psychological health conditions.

Resources

- Recovery and return-to-work planning: wcbask.com/your-recovery-and-return-work
- Work-related psychological injuries: wcbask.com/psychological-injuries
- Psychological injuries - everything you need to know: wcbask.com/documents/psychological-injuries-everything-you-need-know
- Psychological health and wellness resources: wcbask.com/documents/psychological-health-and-wellness-resources
- Psychological injuries fact sheet: wcbask.com/documents/psychological-injuries
- WorkSafe Saskatchewan return-to-work toolkit: worksafesask.ca/industries/return-to-work
- Saskatchewan First Responders Mental Health: saskfirstrespondersmentalhealth.ca
- WorkSafe Saskatchewan Psychological Health and Safety Resource Centre: worksafesask.ca/resources/psych-health-safety-resource-centre
- MyWorkplaceHealth - workplace psychological health and safety: myworkplacehealth.com

Glossary of terms

Authorized practice endorsement (APE) – A professional designation for psychologists or social workers in Saskatchewan that allows those who hold the designation to make and communicate a psychological diagnosis. This is important because for the WCB to accept a claim with a diagnosis provided by someone other than a psychologist or psychiatrist (that is, a social worker), the claim must be adjudicated under Section 27 (POL & PRO 12/2025).

“But for” test – A causation test: But for the work-related factors, would the worker have been able to continue their regular duties or with their regular medical treatment?

DSM – the Diagnostic and Statistical Manual of Mental Disorders (DSM) published by the American Psychiatric Association to help psychological health providers diagnose psychological health disorders.

DSM diagnosis – A diagnosis from the Diagnostic and Statistical Manual of Mental Disorders. For the Section 28.1 psychological presumption to apply, the diagnosis must be provided by a psychologist or psychiatrist.

Material significance – When multiple factors contribute to the injury, the work-related factor must be more than trivial. It must be significant, though not necessarily the predominant cause.

Presumption – If the criteria are met (work-related traumatic event + DSM diagnosis + psychologist or psychiatrist for Section 28.1 and arising out of and in the course of employment for Section 27), the claim is presumed to be work-related unless there is strong evidence to the contrary.

Psychological health assessment – a psychological evaluation completed by a WCB accredited psychologist or psychiatrist and includes:

- An assessment and diagnosis of a disorder, or confirmation of a diagnosis, in accordance with the DSM,
- Recommended treatment, and
- Recommended return-to-work planning.

Psychological injury – A psychological disorder or condition that meets the DSM diagnostic criteria (for example, acute stress disorder or post-traumatic stress disorder) and has arisen, or is presumed to have arisen, out of and in the course of employment.

Standard of proof – “More likely than not” – To rebut the presumption, evidence must show it is more likely than not that the event did **not** cause the injury.

Substantial work-related stressor – A stressor that is of excessive intensity or duration compared to normal workplace pressures. Examples include harassment or discrimination (as defined by *The Saskatchewan Human Rights Code, 2018*), bullying or personal harassment, sexual harassment or excessive and long-standing workload beyond normal expectations.

Traumatic work-related event – Exposure through direct personal experience or as a direct personal witness to **an event, or series of events**, arising out of and in the course of employment resulting in a psychological injury, including:

- Actual or threatened death or serious injury to a worker or others,
- Sudden and typically unexpected event(s), occurring at a specific time and place, or,
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For more information, visit the Saskatchewan WCB's website at wcbsask.com.

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