

Submission #35

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The Brandon Professional Firefighters Association Local 803 of the  
**International Association of Firefighters**

Presentation to the Public Hearing on the  
Workers Compensation Act

April 2004

BRANDON PROFESSIONAL FIREFIGHTERS ASSOCIATION  
PRESENTATION TO THE PUBLIC HEARING ON THE  
WORKERS COMPENSATION ACT

**Good afternoon I speak** to you today on behalf of the Brandon Professional Firefighters Association.

**In** addition to fighting fires and providing medical care, these men and women are responsible **for hazardous materials responses (including** but not limited to chemical and biological disasters), we also respond to technical rescues such as high angle **rescue**, trench rescue, and water rescue.

As firefighter/paramedics serving our community, we generally are the first to respond to emergencies and are exposed to a multitude of known and in many cases unknown dangers to our health and well-being. Many disabilities received while in the work force creep up on us silently such as cancers, and respiratory ailments. Others are more sudden and visible such as amputations and physical deformities. Our quality of life is greatly reduced. Forgotten are many of those who sacrificed their health as part of the workforce. We feel there is an impact that goes far beyond the physical disability.

Therefore, it is time that the Workers Compensation Act be reviewed and changed to recognize the true sacrifice made by workers.

The following are some of the concerns that the Brandon Professional Firefighters Association would like addressed:

#### 1. Occupational Disease

The Workers Compensation Act requires proof that the workplace has been the dominant cause of the illness before accepting responsibility. Fire Fighters are repeatedly exposed to carcinogens and toxins at any given fire, be it a garbage can or a chemical warehouse. Years and years of exposures take their toll, usually resulting in shortened quantity and quality of life

There are Fire Fighters who have been diagnosed with an occupational disease but because the illness has spread the **dominant** cause has yet to be determined if at all.

In most cases autopsies must be performed to determine the “dominant cause” before responsibility is accepted under the Workers Compensation.

***Put yourself in the place of having to ask terminally ill members who have possibly undergone many operations and are at the end of their lives or grieving widows and families for these autopsies to be performed.***

We believe that there must be some recognition by the Workers Compensation Act when the occupational disease cannot be determined as the dominant cause but is a contributing factor

## 2. Impairment Awards

Fire Fighters who suffer an injury resulting in a permanent disability are compensated on a flat rate basis and the amount is then reduced for workers over the age of 45 by 2% per year for every year up to a maximum of a 40% reduction of the award. This amount does little to compensate for the scarring, loss of body parts and body functions. Those burdens are worn permanently 24 hours a day, 7 days a week, 365 days a year.

**We therefore believe the impairment awards are not fair compensation and must be changed to reflect the loss incurred by the worker.**

**Furthermore the benefit reduction of 2% per year for workers over the age of 45 must be removed.**

## 3. Surviving Spouse Benefits

Under the Presumptive Bill 5 there have been Fire Fighters who have died and their claims accepted

The surviving spouse is given a wage replacement for 5 years after the death. In the once recent case the surviving spouse was under 50 years of age. The fact that the surviving spouse not only has to deal with the tragic loss and sacrifice of their loved one, but will have to deal with the concerns of her financial security in the future.

**We believe that the 5 year limit on benefit payments for a surviving spouse must be removed.**

In closing:

The citizens of Brandon expect, that when they are in need of our help that we will be there. The changes that the Brandon Professional Firefighters Association have brought forward today will help us and our families in our time of need

Thank you, **Submitted by Terry Parlow**

President of the Brandon Professional Firefighters Association

PART 2

Expansion of the current Presumptive

Legislation for Firefighters

Presenter: Terry Parlow, President BPFPA

**Brandon  
Professional Fire Fighters  
Association**

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In May of 2002 the first presumptive legislation for Firefighters of its kind was passed in Manitoba. The legislation was passed due to the overwhelming medical evidence to support it. Today is no different the evidence supports the following:

The current legislation covers 5 cancers:

1. Brain
2. Bladder
3. Kidney
4. Non-Hodgkin's Lymphoma
5. Leukemia

We are before you today asking that the legislation be expanded to include:

1. Lung Cancer
2. Colon Cancer
3. Heart disease within 24 hours of a firefighter shift

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The current legislation creates a rebuttable presumption that firefighting has a connection to these 5 cancers.

The main legal effect is it switches the burden of proof from the employee to the employer in deciding whether the claim should be accepted.

There are accompanying regulations that create a minimum latency period for the cancer ranging from 5 to 20 years depending on the cancer. The regulations also require that the cancer must be the primary site of the specific cancer.

This legislation covers professional urban firefighters only, however, there is currently a study being conducted to see if the legislation should be expanded to volunteer firefighters.

Since this legislation has been created we have had close to 20 firefighters in Manitoba covered for WCB claims involving these cancers. Prior to this legislation there was not one claim covered for a firefighter with occupational cancer in the history of Manitoba. Since May of 2002 we have seen the provinces of Alberta, Nova Scotia, New Brunswick and Saskatchewan pass legislation similar to Manitoba's Bill 5.

We believe this legislation should be expanded to colon, lung cancer and Heart disease because the scientific studies support our request. This is especially clear when we take into account the "Healthy Worker Effect".

Because of the limited time I have here today I will not be able to go into the numerous scientific studies supporting our request. However, these studies have been given to the WCB through the Minister of Labour, and we welcome further discussions with representatives of WCB in the future.

The firefighters of Brandon and all of Manitoba are committed to see our request through. We currently have active firefighters in Manitoba who are dying of these diseases and they will not be properly compensated without their disease being recognized under the presumptive legislation for firefighters.

Terry Parlow

President

Brandon Professional Firefighters Association