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The Pas & District Labour Co-ordinating Committee
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Welcome to The Pas, I hope you have had a pleasant trip, and enjoy your stay here. First I would like to say The Pas & District LCC affiliation is diverse, we represent unions that are affiliated to the MFL and some are not. This Committee fully endorses the MYL brief that was presented to you in Winnipeg a couple weeks ago. We do not want to repeat the MFL brief but at times may hit on the same topic. We want to talk about problems we have living in the north or outside the perimeter highway see with WCB. We would also mention some of the other problems that we as workers see with WCB and the bureaucracy.

ISSUES

1} Medical Officer- When warranted Medical officers should conduct field investigations when considering an appeal at that level and when requested by the claimant meet and clarify issues before adjudication of a claim.

Officers adjudicating a claim very often have no idea of the claimants work environment or working conditions.

2} Listing of appeals - files that are referred back to adjudication by review office based on new medical evidence but still not accepted must be given top priority and revert back to review office with out losing its position in other words first preference in the decision making process.

Often files that are referred back end up on the bottom of the pile, causing further delays for the claimant.

3) Medical review panels -- 67(4) delete the wording (if the worker requests the board in writing before a decision of the appeal commission) new medical may arise

Change in the act to make it fairer to the claimant.

4} M..R.P.--The questions put to the medical review panels are drafted by the board. The injured worker has no control and very little impute in the drafting of the questions that an M.R.P. will consider, presently this is at the discretion of the board if they will consider this request. The difference of medical opinion only arose because of an opinion by a physician on behalf of an injured worker therefore the claimant should Provide impute in the process should he want a specific question put to the panel.

Claimant should have opportunity to put question to M.R.P. that he/she or his personal Doctor feel will represent his or her case - To often it seems the questions are not supportive of the claimant, or his/her work environment.

5} Chiropractic professionals --can only open a new claim not on a reoccurrence of the same claim at a later date as the report is not considered an (medical opinion)by the board -also they do not to carry any weight in requesting a M.R.P. to resolve a difference of medical opinion.

If a claimant's problem comes back and they were receiving chiropractic service the Chiropractic can't reopen the claimant's claim or put him on restrictive duties or off work. Very often the claimant is denied WCB because be never seen a medical doctor on the original claim so there is no medical support. This has to be corrected.

6} Rehabilitation--- 27(20) change the word may to shall-- workers who have a

permanent work related restriction must be fully retrained

It is the board's responsibility to retrain workers who have been hurt in the course of earning a living. Workers should not be shoved aside like a piece of garbage.

6} Problems Rehabilitation --Injured workers who have skills in certain trades after a period of time on compensation May lose their certification in that trade i.e. E.M.O. officers, RNs,. After a period of time on compensation the claimant may lose their medical support and be considered fit to return to work by the board and are unable to because their employment certification has lapsed in their trade. To renew that certification requires extensive retraining to return to their former positions which may not always be available in the north. The W.C.B. will not cover these expenses and the claimant is left out in the cold with no employment even if work is available with their employer.

RENEWALS OF THOSE TRADES THAT REQUIRE RECERTIFICATION AS A RESULT OF A WORK RELATED INJURY SHOULD BE THE RESPONSIBILITY OF THE BOARD.

Support should be there to retrain the worker for his certification. The Certification expired because a person was on Workers Compensation for a period of time, therefore the board should retrain. Support should also include family if it requires relocating for a time.

2} Workers who require therapy to return to work are very often asked to go into Winnipeg to get this rehabilitated therapy with no regard for their family situation or home life.

7} Car expenses should be revised for those claimants who motor to Winnipeg the rates should be higher north of 53 to reflect higher gas prices in the north.

8} APPEAL PROCESS--- claimants who are cut off benefits by the board must travel south to seek proper medical evidence in order to get reinstated by the board. For those injured workers who are reinstated in the appeal process, because of the new medical evidence they should have their travel expenses reimbursed as it was

through no fault of their own that the trip had to be made south to establish medical evidence.

All the expertise seems to be in the south and the board hesitates to take the local Doctor's opinion.

9) Insurance plan----workers under the old act are not covered by any life insurance plan also no one has coverage for drugs-- the board should establish one over all Insurance plan through a carrier such as blue cross and co-insure the cost for long term injured workers with permanent restrictions

Many workers would have drug and life insurance coverage if they were still able to work at their employment for themselves and their family The loss of this coverage is a hardship to the claimant and should be covered under WCB.

10) LIGHT DUTY EMPLOYMENT -- a process must be set up whereby the claimant's treating physician has the final say as to whether or not a claimant is capable of performing light duty work, in most cases this judgement call is based on a review of the file in Winnipeg~

The medical officer in most cases have never even talked to the claimant or knows anything about his work environment.

11} SECTION 22 new wording is required ---all time loss must continue to be paid unless the injured worker with medical restrictions is advised in advance that he is expected to mitigate his loss of income by the board , workers only find out about this issue after the fact when its too late to do anything about it.

Workers are unaware that there is an expectation by the Board that they are expected to seek alternated employment within their medical restrictions. Then other problems sometimes occur, often workers find employment for another company within their medical restrictions, only to find out it was short term or not

steady. If this happens the board has a responsibility to cover wage loss once again until such a time as the worker can find employment equal to the wages of the job he/she can no longer perform or one that pays a greater income.

12) CHRONIC PAIN POLICY --must be revised to reflect a more humane approach for injured workers for example an injured worker may be able to function better in a social setting at a leisurely pace where there is no pressure to produce. Than on the job where the requirements are greater such as in heavy physical accident employment at a more hectic pace.

Very often a claimant may be able to do something at a leisurely pace for short periods of time, not hour after hour at work.

13) Minimum Guaranteed Income - An income level above the poverty line or at the very least pegged to the minimum wage should be established. It should change with the minimum wage.

If a person suffers a permanent disability and loses their income and can't return to their employment and this was the first job in a while through no fault of theirs. Example From a reserve "with high un employment, just came off welfare etc. Giving the claimant a pension without this guarantee is subjecting them to a life of poverty.

14) The WCB is seen by many workers as a problem and restriction they have to a right of injury insurance. The officers continually hassle the claimants over various issues. They even try to get them to return to work against their Doctors advice. They seem to think the claimant should be at their beck and call 24hrs a day. They call week after week to question the claimant with the same questions. If they do not get the answers they want, than the claim is delayed or stopped. Employees view the officers at WCB as cops or just another pawn of the employers.