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Workers Compensation Act public hearings

Dear Review Committee

I have been assisting injured workers since the early 1980's. I have had my successes and my losses. While there are many issues that need to be considered, my presentation will mainly focus on the three following topics, the Healthcare Unit, Employer access and the relationship(s) between WCB and Employers. Other important issues will also be included for consideration by the Review Committee, post hearings.

The types of workplace injures have not changed, only the numbers have changed. Repetitive strain and joint related injuries are much more common complaints. This is no surprise. Boomer demographics dictated this would happen. Everybody knew this. That is why the previous government, at the request of employers changed the Act to specifically make it difficult or impossible to be compensated for years of workplace abuse. The changes to the Act were followed by policy changes and a general managerial attitude shift at the WCB. There seems to be an over whelming reliance on outdated research material. The WCB has not kept up with or does not want to keep up with current research on RSI's and soft tissue injuries. Also the Healthcare unit's use of recovery norms and to deny benefits when the Health care unit can't understand that there could be other underlying causes for a delay in recovery. In addition there is a high turnover of hourly staff, poor working conditions and outdated employee training. It seems that the Healthcare unit (doctors/specialists) has gone out its way to make the acceptance of injury claims for RSI's and joint related injuries an exercise in futility. Anywhere up to forty years of work is not the cause of these types of injuries. It's because you're blue or green, brown haired or spike haired or any other implausible excuse the Healthcare unit can come up with . The claimant's elbow/wrist/shoulder

problem is not work related, it is gender/race/someone did a study related. Pulling wrenches for thirty years could not be the cause. The claimant's lower back problem is not work related, it is gender/had children/went shopping related. Lifting and turning patients for fifteen years could not be the cause. These are not fiction.

RSI's and joints are not alone. I helped my dad on the farm as a kid and did some seasonal hunting. Thirty plus years of industrial noise exposure is not the cause of hearing loss. The often used, the claimant is too young for surgery, let's make life absolute hell for the claimant instead. Better for us to save a few bucks and throw a thirty year work life away and destroy the claimant's pension in the process. The claimant fell off a ladder. The Healthcare unit determined a cane should be used to get around. Have fun at work installing windows while on the ladder. The cane should be handy when installing those second floor windows.

In conversation with other advocates, my concerns are justified. There has been a definite shift in the way Healthcare unit looks at all injuries. Good medical evidence is ignored. WCB workplace assessments always seem to be done without the worker or a union representative. Whatever the Healthcare unit says, and termination of benefits is the result, that's the answer we were looking for. This is not fiction.

Employer access to the complete file was probably the best thing to happen for them. The WCB has its head in the sand if the thought remains that employer's do not use this treasure trove of medical information for purposes other than appeal doesn't happen. We all know that very often other medical information not related to the injury is innocently included. Employers' diligently go through the file to look for anything they can use against the potential claimant. My employer does this. Employers spend vast sums of money in the pursuit of claims investigation. Why are you on this type of medication? You were injured before, where? You have this condition? These have nothing to do with the claim but it is on file. Of course none of this is written down officially. It is written down in "notes to self" by management. By the WCB's own statistics, claim fraud is so miniscule it is financially irrelevant. In the balance of probabilities, the worker is truly injured if the worker says so. The employer on the other hand does not have to be honest. Employers can write anything no matter how ridiculous and the WCB will believe them. Very few employers know how work that employees do for them is actually done or what is fully involved. No matter what, the employer says goes. Employers lie all the time. It is done in arbitration, at contract, about the environment, to the public and anyone else as long as it will save them money.

It is incumbent for the claimant to be honest in dealing with the WCB. This is stressed by the worker advocates. Unfortunately this honesty results in delayed or termination of benefits. Workers want to return to work. It is inherent in workers (humanity) to try. The employer videos a worker doing whatever, calls the WCB and termination results. No contact, no investigation, nothing.

Employer advocates usually are ex-WCB employees. They already have a cozy relationship at the WCB. Employers have a built in relationship with the board. Employers have well funded HR departments to make every effort to mitigate time loss accidents. Worker advocates usually are not involved until there has been a denial benefits. There are a couple of full time agencies to help workers and a few of the larger unions are able to afford full time people to deal with WCB claims. This issue has been brought up before with the WCB. Employers get respect at the WCB, worker advocates, well, they're out there. The evidence is in file correspondence. Employers should be at arms length and not in perpetual hug.

To be fair to WCB employees, there are still a number of dedicated, top notch, willing to go the extra mile people. I have respect for these overloaded employees who always seem to be in a constant state of flux. For whatever reason, people seem to be moving within the system all the time (high turnover). This can't be good or maybe it is by design that this is so. MY concern is with the Health care unit (doctors/specialists) who when not at the WCB, will work for the claimant then flip to the anti-worker position when at the WCB. The employer is paying and wants value for their money. No thought is given to the original principal of Workers Compensation. If the worker is at work, doing work, gets injured at work, then pay. Again, fraud statistics prove the point.

Other issues for consideration;

Age discrimination: A worker earns the same amount of money whether the worker is age 45 or age 46.

PPI awards: \$1100.00 for losing a finger! The worker is compromised for life. There are many examples on file to show how disgustingly inadequate these awards are.

Pension issue: A worker with twenty years is permanently injured. The company does into contribute to the pension plan. At retirement the worker, if not already destitute because of being on benefits, gets a reduced company pension, a reduced CPP pension and has probably already used up any savings, is destined to a life of poverty. The WCB shall maintain the pension premiums so that the worker receives a full pension, as the definition of pension is deferred wages.

Benefits to be based on the wages at the time of injury: If a young worker starts work at \$15.00 an hour and two days later is injured, that is the wage. A worker, finally earning \$70,000 a year is the wage. Taxes are not capped at \$50,000 a year. There are many other issues that will be brought forward during the Hearings. The Act is not balanced. Changes need to be made.

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