

WORK SAFE. FOR LIFE.
WORKERS' COMPENSATION BOARD OF NOVA SCOTIA

**Policy Background Paper:
Housekeeping Changes to WCB Policies**

June 2021

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1. Background

Periodically the WCB reviews its policies to identify potential housekeeping changes.

Housekeeping changes typically include:

- the correction of spelling and grammar errors
- updating references and WCB department names
- updating minor process features

Reviewing housekeeping changes to WCB policies was last done in 2016-17. These changes help to ensure policies are accurate, up-to-date, relevant, and reflective of current terminology and language.

2. Scope

We have identified a number of policies requiring housekeeping changes. See Appendix A for full list and description of the changes. The vast majority of these changes correct spelling/grammar errors or update references, and update policy language with respect to gender. As part of the review, we have also identified policies that are no longer necessary or utilized that can be rescinded for clarity and to streamline the Policy Manual.

3. Consultation

Considering the WCB's *Policy 10.3.11 – Policy Consultation*, we will undertake a One-Stage consultation process with a consultation period open **until September 30, 2021** for the proposed housekeeping changes. A One-Stage consultation process is appropriate because the proposed housekeeping changes:

- Don't impact policy intent. The changes correct spelling and grammar errors, update references, or update process elements; and
- Do no impact entitlement or level of worker benefits, assessment rates or the financial health of the system.

Please note, the WCB is not consulting on policy intent or other substantive aspects of the policies discussed in this paper. The WCB Board of Directors will consider the input received from stakeholders before making final housekeeping changes to the policies.

If you would like to comment on the draft housekeeping changes to policies, please provide your feedback by September 30, 2021 to:

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4. Proposed Policy Changes

Appendix A describes the housekeeping changes being proposed and combines the changes into three categories;

- 1) Policies with modified wording (additions and deletions) to reflect current practice or minor changes.
- 2) Policies recommended to be rescinded as they are no longer necessary or utilized.
- 3) Policies modified to remove outdated gender references.

In addition to the specific changes outlined in Appendix A, the following will also be updated for each policy:

- Revision number
- Effective date
- Date Issued
- Date approved
- Application (where applicable)

As well, a number of policies will require “consequential” updates. In these instances, policies that reference a policy undergoing a housekeeping change (Appendix A) will require an updated policy number. See Appendix B for a list of these policies.

Full versions of all WCB policies are available on the WCB’s website at wcb.ns.ca or by clicking on the following link: [Policy Manual](#).

Appendix A

Policies with Modified Wording Updates

	Policy	Proposed Policy Change (strikethroughs are deletions and additions are bold and underlined)	Comment
1.	Clothing Allowance – 2.1.5R2	<p>2. (ii.) However, in some cases, the Board may determine that a worker should be provided with an orthotic or prosthetic device, of the type described in the Schedule to this policy (a “prescribed device”) for short term use even though the worker does not and is not likely to have a permanent medical impairment as a result of a work related injury. In such cases, and provided the worker satisfies the other conditions of entitlement set out herein, the worker is entitled to the payment of a clothing allowance, in the annual amount determined in accordance with this policy, on a one-time basis. An application on behalf of a worker by any such worker a Medical Specialist for the payment of a clothing allowance in subsequent years will be considered upon the receipt of a completed application form Clothing Allowance Declaration Form and of medical evidence acceptable to the Board substantiating the need to wear the prescribed device for a period longer than one year as a result of a work related injury.</p> <p>5. The worker is required to complete the “Clothing Allowance Declaration Form” (see copy attached). The application form for the clothing allowance shall be created by the Board and provided to the Medical Specialist.</p> <p>Clothing Allowance Declaration Form</p>	Current practice is to require the Medical Specialist to complete the form at the worker’s request and the form is available to the Medical Specialist upon request.
2.	Attendant Allowance – 2.1.6R	<p>1. The allowance is approved and paid after direct consultation with Board staff the Health & Extended Benefits Department. In certain claims, special medical reports may be required.</p>	This allowance is currently approved by a variety of staff within the WCB. This change aligns with current practice and allows for administrative flexibility in the provision of this allowance.
3.	Quality of Service Delivery – 10.3.1R	<p>Definitions:</p> <p>Complaint – A formal expression of dissatisfaction provided to the organization about a product, advice or service offered or provided coupled with a request to remedy the problem. A formal complaint may be filed with the Workers’ Compensation Board (WCB) by phone, letter, fax, e-mail or personal interview.</p>	WCB procedures outline the specific processes for filing a complaint. This level of detail is more appropriate in procedure rather than the policy.

	Policy	Proposed Policy Change (strikethroughs are deletions and additions are <u>bold and underlined</u>)	Comment
4.	Photocopying of Clients' Files – 10.3.4R	1. A file will be copied once and provided free of charge to the client or the client's representative. <u>A client can make a written request or a verbal request to Board staff to receive a copy of their file. If a verbal request is made by the client, Board staff will add the request as a note on the client's file. A client's representative may only make a request for a copy of a client's file in writing, and the written request will be added to the client's file.</u> The written request will be placed on the client's file. Subsequent information in the same file(s) will be copied, if requested.	Workers are permitted to make a verbal request for a copy of their file, with WCB staff making a note to file. A worker's representative is required to make a written request. These changes update the current policy to make the process easier for workers and align with current WCB practice.

Policies Recommended to be Rescinded

	Policy	Comment
5.	Fee Schedule Assessment: Automatic Assumption Claims – 1.2.2	Fees are generally not incorporated into policy, and rescinding this policy aligns with this practice at the WCB.
6.	Second Opinion Spinal Surgery – 2.2.2	Fees are generally not incorporated into policy, and rescinding this policy aligns with this practice at the WCB.
7.	Temporary Transition- 9.3.2A	When the Rate Setting Model was first introduced in 1996 a temporary transition process was implemented and has been completed. There is no longer a need for this policy.
8.	Write-off Uncollectable Accounts – 9.7.1R1	The signing authority for administrative decisions is not generally included in the Policy Manual and is better reflected in internal procedures.
9.	Selection Criteria for Priority Employer Program – 11.1.1	The Priority Employer Program is no longer utilized.
10.	Termination of Priority Employer Program Coaching Services – 11.1.2	The Priority Employer Program is no longer utilized.

Polices with Gender Terminology Updates

	Policy	Proposed Policy Change (strikethroughs are deletions and additions are <u>bold and underlined</u>)
11.	Guidelines for Automatic Assumption – Injuries on or after January 1, 2000 – 1.2.1A	3.3. that an applicant who has been examined by lung function testing, whether allowed or disallowed, shall be recalled as soon as possible after three years have elapsed from the date of the applicant's last test for Automatic Assumption, unless medical evidence justifies an earlier re-examination; however, the Board strongly recommends that each applicant undergo a chest x-ray for <u>their</u> his/her own personal health. These x-rays may be requested by the applicant's family doctor and reported on a Form 8; 3.6. that where an applicant is unable to obtain <u>their</u> his/her work record, a sworn affidavit before a commissioner of the Supreme Court of the province is the only accepted document.
12.	Guidelines for Automatic Assumption – Injuries prior to January 1, 2000 – 1.2.1R	3.3. that an applicant who has been examined by lung function testing, whether allowed or disallowed, shall be recalled as soon as possible after three years have elapsed from the date of the applicant's last test for Automatic Assumption, unless medical evidence justifies an earlier re-examination; however, the Board strongly recommends that each applicant undergo a chest x-ray for <u>their</u> his/her own personal health. These x-rays may be requested by the applicant's family doctor and reported on a Form 8; 3.6. that where an applicant is unable to obtain <u>their</u> his/her work record, a sworn affidavit before a commissioner of the Supreme Court of the province is the only accepted document.
13.	Voluntary Autopsy Reports – Deceased Pneumoconiosis Pensioners – 1.2.3	1.5. The doctors will send a final report giving their opinion concerning what role the claimant's occupational lung condition played in <u>their</u> his/her death and whether responsibility should be accepted by the W.C.B.
14.	Lung Cancer – Foundry Workers – 1.2.8	2.2. Ex-smoker – A person who has smoked during <u>their</u> his lifetime but who has not smoked for the past ten or more years.
15.	Lung Cancer – Coke Oven Workers – 1.2.9	2.2. Ex-smoker – A person who has smoked during <u>their</u> his lifetime but who has not smoked for the past ten or more years.
16.	Criteria for psychiatric conditions: occupational stress – 1.3.5	4. This initial emotional reaction, although minor in most cases can, however, increase depending on several factors. Every worker reacts differently to stressful situations, according to <u>their</u> his or her individual personality. Factors include: a) the severity of the injury; b) whether or not the accident was of a frightening nature; and c) the prior emotional stability of the worker.
17.	Workers' Travel Expenses for Health Care – 2.1.1R14	Use of Private Vehicle A client may use <u>their</u> his/her own vehicle for transportation purposes to access services necessitated by the compensable injury, if this use has been pre-authorized by the Board. Authorized vehicle use will be reimbursed at the rate of 46.70 c/km.
18.	Guidelines for Assessment of Permanent Medical Impairment – 3.3.2R3	Psychiatric Impairment ... This initial emotional reaction, although minor in most cases, can however, increase depending on several factors. These factors include the severity of

	Policy	Proposed Policy Change (strikethroughs are deletions and additions are <u>bold and underlined</u>)
		<p>the injury; whether or not the accident was of a frightening nature; and the prior emotional stability of the worker. Every worker reacts differently to stressful situations, according to <u>their</u> his or her individual personality.</p> <p>...</p> <p>Every effort is made to identify any psychiatric problem, as well as its severity, early in the onset of the worker's claim. In this way necessary psychiatric treatment can be instituted at the earliest possible date, thereby assisting the workers in <u>their</u> his or her recovery and lessening any long term effects of the emotional reaction.</p>
19.	Review of Extended Earnings-Replacement Benefit – 3.4.2R1	3. An EERB may be reviewed 24 months after the 36-month review, if it is determined to be necessary by the Board at the time of the 36 month review. As a general guideline, an EERB will be reviewed a second time if the worker has not established a consistent earnings pattern during the first 36 months the worker was in receipt of the EERB or the worker has shown significant deterioration in <u>their</u> his/her compensable condition. The Board may choose not to set another review date if the information on the file indicates the worker's employment pattern, although casual or seasonal, is still an established pattern.
20.	Periodic Payment of Annuities – 3.6.9	3. Upon application, the Board may allow the worker to choose a financial institution other than the one employed by the Board to administer <u>their</u> his/her annuity.
21.	Commutation of Pensions – 3.7.2R	7. The Board will provide a worker who has been assessed as having a permanent impairment rating of 10% or less with the option of receiving <u>their</u> his or her pension as a series of periodic payments or as an equivalent lump sum. This option will also be provided to a worker who has previously received a commuted pension and whose pension is reviewed and adjusted by the Board in accordance with Section 71 of the Act.
22.	Eligibility for Vocational Rehabilitation – 4.1.1R	2.4. The worker has lost a job due in part to the compensable injury and requires limited assistance in locating similar employment (i.e. worker is laid off because of <u>their</u> his/her injury status);
23.	Workplace Modifications – 4.2.1	The Board may assist in the modification of the employer's premises where that modification will permit the worker to gain access to the workplace or to fulfil the requirements of <u>their</u> his/her employment.
24.	Workers' Travel Expenses for Vocational Rehabilitation – 4.2.4R15	<p>2. Travel</p> <p>Where participation in a vocational rehabilitation program or service requires a worker to travel, the Workers' Compensation Board may reimburse the worker for mileage in excess of the worker's travel distance to <u>their</u> his/her regular pre-injury workplace.</p> <p>A reimbursement for mileage will be determined by calculating the difference between the distance a worker travelled to his/her regular pre-injury workplace and the distance <u>their</u> he/she is required to travel to access <u>their</u> his/her vocational rehabilitation program or service.</p> <p>A worker may use <u>their</u> his/her own vehicle for transportation purposes to access vocational rehabilitation programs and services, if it is the most economical and reasonable means of transportation and has been pre-authorized by the Board. Authorized vehicle use will be reimbursed at the rate of 46.70 c/km.</p>

	Policy	Proposed Policy Change (strikethroughs are deletions and additions are <u>bold and underlined</u>)
		<p>3. Living Allowance</p> <p>A Case Manager may authorize a living allowance if it is determined appropriate, in the discretion of the Board, for a worker to relocate and maintain a second residence for the duration of their <u>his/her</u> vocational rehabilitation program. Specifically, if the worker must maintain a home while being trained and residing in another location, room and board expenses to a maximum of \$1,500/month (reimbursement based on receipts) may be reimbursed by the Workers' Compensation Board. The living allowance is considered to include the costs of rent, basic utilities, meals and travel expenses.</p>
25.	Section 8 Overview – Internal Appeals	<p>Internal Appeal</p> <p>...</p> <p>It is important to note that it is not always necessary to file a an appeal to have a decision reviewed by a WCB staff member. If new information about a claim or assessment becomes available after a decision has been made, it should be sent directly to the staff member who made the original decision. The staff member can then review their <u>his or her</u> decision, based on the new information provided, without the file having to go through the formal internal appeals process. However, where the decision for which a review is being requested is a final decision of the Board, the new information must be truly new evidence (eg. not a reiteration of evidence already on file or a new argument based on the same evidence) and evidence which could not have been presented by the worker or the employer at the time the final decision was made.</p>
26.	Interim Awards During Adjournment – 8.2.2	<p>2. The Hearing Officer shall only exercise their <u>his/her</u> discretion to award an interim award where there is a preponderance of evidence that the interim award will</p> <p>a) prevent the development of a permanent medical impairment (PMI) or the increase of an existing PMI;</p> <p>b) aid the worker in recovering from their <u>his/her</u> work-related injury; or</p>
27.	Recovery of an Overpayment – 10.2.1R	<p>1. An overpayment occurs when the worker is paid benefits exceeding their <u>his/her</u> entitlement according to the Act, policies or procedures. Once an overpayment is identified, a decision will be made about whether or not the overpayment will be recovered.</p>
28.	Access by Employers to Information Contained in Clients' Claim Files – 10.3.5	<p>Guidelines</p> <p>1. A worker who has received a decision on a claim from the Board is entitled, upon written request, to receive a copy of all the information in their <u>his/her</u> file.</p>

	Policy	Proposed Policy Change (strikethroughs are deletions and additions are <u>bold and underlined</u>)
29.	Principles set out in the National Standard of Canada entitled “Model Code for the Protection of Personal Information” – 10.3.10	<p>Principle 9 - Individual Access</p> <p>Upon request, an individual shall be informed of the existence, use, and disclosure of <u>their</u> his or her personal information and shall be given access to that information. An individual shall be able to challenge the accuracy and completeness of the information and have it amended as appropriate.</p>

Appendix B - Policies Requiring Consequential Updates

The following policies will be assigned updated policy numbers as a result of the housekeeping changes outlined in this paper:

- Calculation of Permanent Impairment Benefit (PIB) – 3.3.1R1
- Review of Permanent Impairment Benefit – 3.3.3R1
- Determining Permanent Medical Impairment Ratings using the Guides to the Evaluation of Permanent Impairment (AMA Guides – 4th Edition) – Injuries on or after January 1, 2000 - 3.3.4R1
- Implementation of Appeal Board Decisions on Permanent Compensation in the Absence of Measurable Impairment – 3.9.6R
- Criteria for Compensation for chronic pain – 7.5.6R
- Fraud and Misrepresentation – 10.3.7R1
- Glossary – *Accommodation, Annuity, Commutation, Internal Appeal, Loss of Earnings, Medically Able, Overpayment, Work Hardening*