

# **WCB's Injury Reporting Web Service**

## ***Onboarding Technical Specifications***

A guide for developing client applications  
for submitting employer injury reports  
and earnings using WCB's Injury  
Reporting Web Service

# Table of Contents

1	Introduction .....	3
1.1	About this manual .....	3
2	Overview of WCB’s Injury Reporting Web Service (V1) .....	4
2.1	Background .....	4
2.2	Overview of the WCBNS-v1 .....	4
3	Summary of Web Service Requirements .....	4
3.1	Injury Report Form Submissions.....	4
3.2	Definition of WCB’s Injury Reporting Web Services .....	5
3.3	WCBNS-v1 Logical Data Flow .....	8
3.4	Business Partner Application Requirements.....	9
4	Web Service Specifications.....	9
4.1	Connectivity Specifications .....	9
4.2	Simple Object Access Protocol (SOAP) Specifications .....	10
4.3	XML Specifications.....	11
4.4	Web Services Security Specifications.....	12
4.5	Message Specifications Summary.....	13
4.6	Detailed Message Specifications and Definitions .....	13
4.7	Submission Error Specifications .....	14
4.8	Earnings Specifications .....	16
5	Overview of Client Development & Implementation .....	16
5.1	End-to-End WCBNS-v1 Web Service Overview .....	16
5.2	Reporting an Event via the WCBNS-v1 Web Service .....	17
6	Client Application Validation.....	18
6.1	Client Application Validation Overview .....	18
6.2	Connectivity Test .....	18
6.3	End-to-End Functional Testing.....	18
7	Connecting to the WCBNS-v1 Production environment .....	21
	Appendix A. – WCBNS-v1 Field List.....	22
	Appendix B. – WCBNS-v1 System Error Responses.....	33
	Appendix C. – WCBNS Web Services Schemas .....	38
	Appendix D. – Sample Submission and Response Messages.....	71
	Appendix E – Environments .....	81
	Appendix F. – Client Application Acceptance Criteria .....	82

# 1 Introduction

Welcome to WCB Nova Scotia's Onboarding Technical Specification for the Interchange Specification Standard (ISS) Web Service..

This document and its contents applies to ISS version 1 (WCBNS-v1), of WCB's Injury Reporting Web Service.

## 1.1 About this manual

### 1.1.1 Purpose and audience

This document is a technical specification for developing processes and systems to interface with the WCBNS-v1 Web Service.

This manual is intended for vendors or employers who want to extend or develop applications to be able to submit accident claim and injury information electronically to the WCBNS via the WCBNS-v1 Web Service.

This document is intended for project managers, business, system and programmer analysts, database administrators, and web developers.

### 1.1.2 Structure

The following is a review of the structure of this document.

**Overview of the Injury Reporting Web Service.** This section provides an overview of WCB's Injury Reporting Web Service.

**Summary of Web Service Requirements.** This section covers the basics of web service technologies in general and specifically how they apply to the service.

**Web Service Specifications.** This section covers the actual specifications from which a client application can be built to communicate with WCB's Injury Reporting Web Service. It provides an overview of the services available and specifications for each including error handling.

**Overview of client development and implementation.** This section covers the processes involved in connecting to the Injury Reporting Web Service including a brief review of reporting requirements, security issues, client validation, support resources, etc., and steps for connecting to the web service production environment.

**The Appendices** contain detailed development resources such as the Field List, full text of all the schemas, sample SOAP messages, etc for this version.

### 1.1.3 Usage

If you are new to the employer requirements for reporting an injury to WCB, please visit our website to learn more: [Report an Injury](#).

If you are new to the concepts and technology behind Web Services, you should review sections 2 - Overview of WCB's Injury Reporting Web Service (V1) and 3 - Summary of Web Service Requirements.

### 1.1.4 For more information

To learn more about WCB Nova Scotia, visit <http://www.wcb.ns.ca/>. For more information about the Interchange Specification Standard, contact WCBNS E-Business Support at [ehelp@wcb.ns.ca](mailto:ehelp@wcb.ns.ca)

## 2 Overview of WCB's Injury Reporting Web Service (V1)

### 2.1 Background

There are several systems and processes available for submitting injury report information to WCB Nova Scotia, whether electronically or using traditional means. For the purposes of this document, these multiple systems are referred to as the WCB Claim Process System. The Injury Reporting Web Service is the latest interface for submitting to the WCB Claim Processing System.

### 2.2 Overview of the WCBNS-v1

The *Interchange Specification Standard* (ISS) is a detailed description of the data requirements for electronic accident and injury reporting to WCB. The specification is for the use of employers and external vendors to develop injury reporting software modules to fit new or existing information systems. Employers may also use this specification for the development of custom electronic incident and injury reporting software. The Injury Reporting Web Service simplifies reporting by introducing industry standard technology for business interchange.

## 3 Summary of Web Service Requirements

This section provides a general overview of web services, its basic components and how the end-to-end process of reporting using WCB's Injury Reporting Web Service works.

### 3.1 Injury Report Form Submissions

Release 1 of the solution will provide an electronic version of Injury and Earnings Information submission. Employers and Service Providers will submit these forms into WCB's document repository, where existing business processes will continue to process the forms.

This will provide a number of benefits to both internal and external stakeholders, including:

- Allowing partners to submit forms electronically removes the need for faxing and/or paper mail.
- Integrating systems in order to submitting data directly from the Employer to WCB removes the need to complete forms multiple times for difference systems.
- Forms will be submitted faster, allowing time sensitive processes to begin in a timelier manner.

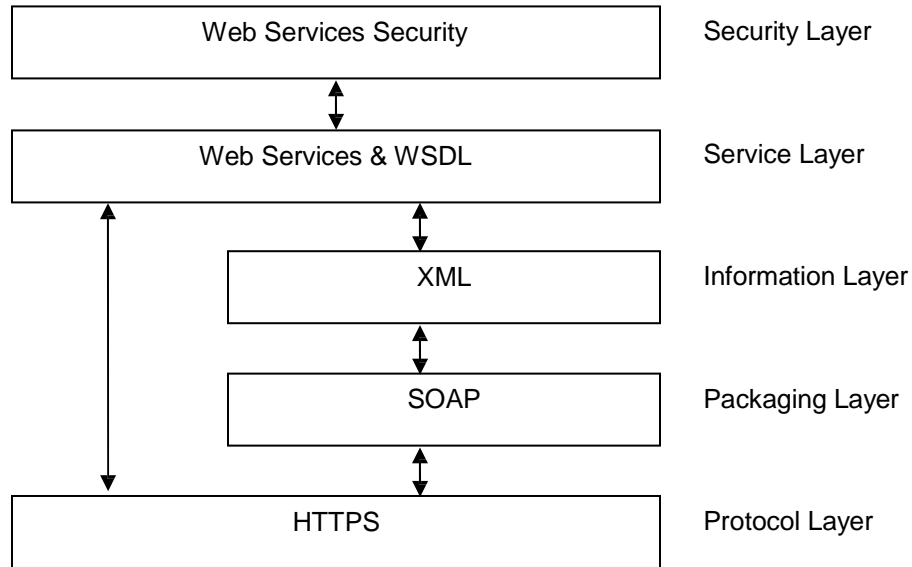
In order to facilitate these transactions, the ESB will expose a SOAP based interface for verified partners to use for submitting completed forms. After schema and business validation, the ESB will communicate directly with the WCB's document repository to insert the data.

### **3.2 Definition of WCB's Injury Reporting Web Services**

The Injury Reporting Web Service is an Extensible Markup Language (XML) application that transports data between Business Partner applications and the WCB Claim Processing System. By creating an XML document in the form of a Simple Object Access Protocol (SOAP) message, a Business Partner program can send injury and earnings information to the Web Service across the internet, and receive a response, also in the form of an XML document. Upon receiving an XML document, the Web Services interface validates the data against business rules (as defined in the appendices of this document) and transforms the XML data into a format understood by the WCB Claim Processing System. XML documents that do not pass the validation will be rejected and the submitted data will not be saved in the WCB Claim Processing System. All messages will be stored in an audit log even if they fail business validation.

Like all Web Services, WCB's Injury Reporting Web Service is comprised of multiple layers, namely:

**Figure 2 – Web Service Layers**



### 3.2.1 Security Layer

The WCBNS-v1 is not a public web service. Employers and claims management providers are able to access the Web Service only after registering with WCB. The Web Service listens to all incoming inquiries but only responds to requests carrying the credentials of external providers and employers registered and certified to use the service. For more information about registration, see section 4.4.1 – Registering with WCB Web Services Security.

### 3.2.2 Services Layer

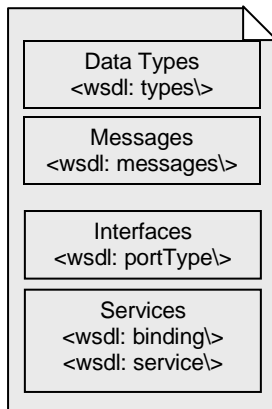
A description of each service accessible through the Web Services interface is required so the Business Partner can contact and use the Web Service. The Web Services Description Language (WSDL) is the de facto standard for providing these descriptions. Using WSDL, a Web Service describes what it does, how it does it, and how consumers of that Web Service can go about using it. Both WCB and the Business Partner share a common WSDL file which defines four types of things: data types, message, interfaces, and services.

- **Data types:** the data types—in the form of XML schemas—to be used in the messages
- **Message:** an abstract definition of the data, which, in the case of the Injury Reporting Web Service, is in the form of an XML message presented as an entire document
  - **Operation:** the abstract definition of the operation for a message, such

as naming a method that will accept and process the message

- **Interfaces**
  - **Port type:** an abstract set of operations mapped to one or more end points, defining the collection of operations for a binding; the collection of operations, because it is abstract, can be mapped to multiple transports through various bindings
- **Services**
  - **Binding:** the concrete protocol and data formats for the operations and messages defined for a particular port type. NOTE: Keeping the operations and messages abstract allows them to be bound to different protocols and data formats such as SOAP, HTTP(S) GET/POST, or MIME
  - **Port:** a combination of a binding and a network address, providing the URL address of the Web Service

**Figure 3 – WSDL Schema Structure**



For detailed information about the WSDL, see [WSDL](#).

### 3.2.3 Packaging Layer

Once an interface is defined, Web Services need a way to communicate with one another and to exchange messages. The Simple Object Access Protocol (SOAP) defines a common format for XML messages over HTTP and other transports. The Injury Reporting Web Service uses Simple Object Access Protocol (SOAP) version 1.1 and Electronic Document Interchange (EDI) to define a standard format and interpretation of messages.

### 3.2.4 Protocol Layer

The Web Service uses HTTPS for transporting SOAP messages. In order to use the Web Service a Business Partner application must be able to access the Internet via HTTPS and send and receive SOAP messages.

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NOTE: Business Partners using proxy servers may have additional coding requirements depending on the proxy's configuration.

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### 3.2.5 Information Layer

XML is a meta-language, like Hypertext Markup Language (HTML), that enables cross- platform data interchange using a standard method for encoding and formatting information. Unlike HTML, XML lets you publish information about a data’s structure and its meaning or context.

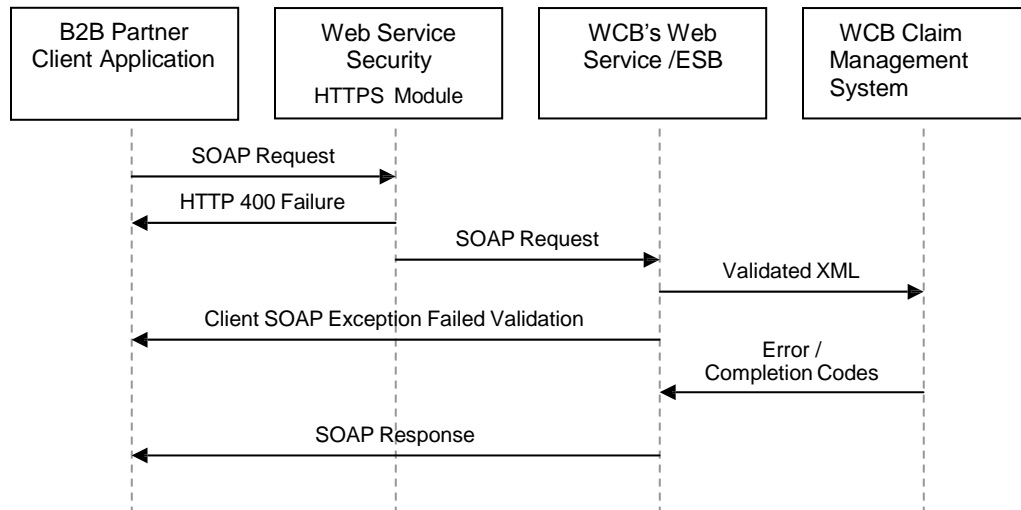
### 3.3 WCBNS-v1 Logical Data Flow

There are four primary actors engaged during the processing of a Web Service request:

- B2B Business Partner Application
- Web Services Security HTTPS Module
- Injury Reporting Web Service / ESB
- The WCB Claim Processing System

Web Services can use many transport protocols but the most common is Simple Object Access Protocol (SOAP). The following illustration shows the SOAP messages flowing back and forth along this data path.

**Figure 4 – WCBNS-v1 Logical data flow diagram**





### 3.4 Business Partner Application Requirements

The basic Business Partner application requirements are as follows:

- Produce WCBNS-v1 Schema compliant XML for the following messages:
  - Submission of Employer's Report of Injury
  - Submission of Employer's Report of Earnings
- Adhere to the Business Requirement for each message
- Send properly structured SOAP messages to the Web Service in accordance with the Web Services Definition Language (WSDL) specifications
- Receive properly structured SOAP messages from the Web Service in accordance with the WSDL specifications
- Receive, log and process error messages

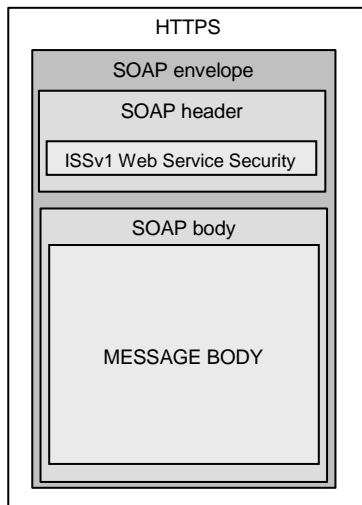
## 4 Web Service Specifications

This section contains detailed specifications describing all acceptable message transmissions that WCB can process and all responses WCB can generate. Using this specification, the Business Partner can construct a computer system capable of generating and receiving such messages. Upon successful validation of an incoming message, the submission will be stored into WCB Claim Processing System where existing business processes and downstream applications will proceed.

### 4.1 Connectivity Specifications

To secure the integrity of the sensitive data being transferred between the Business Partner and WCB's Web Service, all transmissions (outgoing and incoming) must encrypt SOAP messages using the Secure Socket Layer (SSL) protocol often referred to as HTTPS.

**Figure 5 – The WCBNS-v1 HTTPS Protocol**



The Business Partner will connect to one of two Web Service environments; there is a Client Validation (CV B2B) environment, which can accept the test data and does not forward it to the WCB Claim Processing System, and a production (B2B) environment, which connects to the WCB Claim Processing System in production.

Their respective URLs are as follows:

**Table 1 – WCBNS-v1 Web Service URLs**

<i>Client Validation:</i>	<a href="https://cvb2b.worksafens.ca/ISSv1/ISSv1">https://cvb2b.worksafens.ca/ISSv1/ISSv1</a>
<i>Production:</i>	<a href="https://b2b.worksafens.ca/ISSv1/ISSv1">https://b2b.worksafens.ca/ISSv1/ISSv1</a>

## 4.2 Simple Object Access Protocol (SOAP) Specifications

The XML syntax for expressing a SOAP message is based on the soap-envelope namespace (<http://www.w3.org/2001/06/soap-envelope>). This XML namespace identifier points to an XML Schema that defines the structure of what a SOAP message looks like.

### 4.2.1 SOAP Message Structures

As defined in the WCBNS-v1 schemas, a valid SOAP message consists of an envelope containing a header and a body, as shown in diagram “Figure 6 – The WCBNS-v1 SOAP message structure”. The header contains blocks of information relevant to how the message is to be processed. The body contains the actual message to be delivered and processed. Each SOAP Body element contains a single WCBNS-v1. A single reported incident may contain information for one worker only each with his/her own injury, wage and contact information.

**Figure 6 – The WCBNSv1 SOAP message structure**

```
<?xml version="1.0"?>
<SOAP-ENV:Envelope xmlns:SOAP-ENV="http://www.w3.org/2001/12/soap-envelope"
SOAP-ENV:encodingStyle="http://www.w3.org/2001/12/soap-encoding">
  <SOAP-ENV:Header>
    ...
  </SOAP-ENV:Header>
  <SOAP-ENV:Body>
    ...
    <SOAP-ENV:Fault>
      ...
    </SOAP-ENV:Fault>
  </SOAP-ENV:Body>
</SOAP-ENV:Envelope>
```

## SOAP Envelopes

As defined in the WCBNS-v1 schemas, each SOAP Envelope element contains one Header and one Body element. The Body element contains the XML message.

The Header element must appear as the first child of the Envelope, before the Body. Each element contained by the Header is called a header block. The purpose of a header block is to communicate contextual information relevant to the processing of a SOAP message. To validate against the WCBNS-v1 schema the header block must contain authentication credentials such as Business Partner ID, Business Partner Type and Business Partner Token. For more information, see section “4.4.1 – Registering with WCB Web Services Security”.

### Figure 7 – SOAP envelope example

```
<soap:envelope xmlns:soap="http://www.w3.org/2001/12/soap-envelope"
soap:encodingStyle="http://www.w3.org/2001/12/soap-encoding" >
  <soap:Header>
    <wcbSecurityHeader xmlns="http://B2B.worksafens.ca/ISSv1/wsSecurity">
      <BusinessPartnerID>BUSINESSPARTN01</BusinessPartnerID>
      <BusinessPartnerType>SP</BusinessPartnerType>
      <BusinessPartnerToken>CF3821ED-75E0-457E-A181- D89CA056A438</BusinessPartnerToken>
    </wcbSecurityHeader>
    <BN>123456789012345</BN>
    <messageDateTime>2016-11-11 13:20:00.000-04:00</messageDateTime>
    <claimNumber>9999999</claimNumber>
    <loginName>BUSINESSPARTN01</loginName>
    <submittedBy>B, BUSINESSPARTN01</submittedBy>
    <SubmissionCorrelationID>AD3821CE-77D0-457A-D182- A32CA426A123</SubmissionCorrelationID>
  </soap:Header>
  <soap:body>
    <WCBReportForm version="1.0" encoding="UTF-8">
      ...
    </WCBReportForm>
  </soap:body>
</soap:envelope>
```

This example illustrates all of the core components of the WCBNS-v1 SOAP Envelope specification. There is the <soap:envelope>, the topmost container that comprises the SOAP message; the <soap:header>, which contains additional blocks of security information and how the body is to be processed; and the mandatory <soap:body> element that contains the actual message to be processed.

## 4.3 XML Specifications

WCB’s Web Service currently uses Extensible Markup Language (XML) version 1.1 as defined by the W3C (<http://www.w3.org/2001/XMLSchema>).

## 4.4 Web Services Security Specifications

To protect the integrity of WCB’s Injury Reporting Web Service, WCB uses several firewalls, each of which requires authentication before permitting messages to pass. Prior to requesting access to the Web Service, the Business Partner must register with WCBone or more static IP (Internet Protocol) addresses from which the calls to the Web Services will be made.

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NOTE: All registered Internet Protocol addresses must be static, that is, not assigned by a DHCP server.

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The Web Service’s security infrastructure will validate each message sent to WCB’s Web Service by checking the following header elements against the security database to:

- Verify the business partner’s authentication credentials
- Verify the incoming SOAP request is coming from the business partner’s registered static IP address
- Ensure the business partner has the proper authority to request the particular SOAP action

All messages not conforming to these requirements shall be denied access to the Web Service.

### 4.4.1 Registering with WCBNS Web Services Security

The following table (Registering with the WCBNS Web Services Security) defines the information required for registering for access to the WCBNS-v1 Web Services.

**Table 2 – Registering with WCB Web Services Security**

Information Required for Registration	
Item	Description
Partner name	The legal or trade name of the business partner.

Information Required	for Registration
Contact name	This name of the individual at the partner site that will be the primary contact for resolving Web Service problems. This is likely a technical individual (may be a developer or Web Services support person).
Contact phone number	The phone number of the contact person.
Contact email	The email address of the contact person.
IP Address	One or more static Internet Protocol (IP) address from which the Business Partner will initiate all submissions to the WCBNS-v1 Web Service.
WCB Employer Account Number	The employer’s account number assigned by the WCB and used when submitting employer reports. This is the 15 digit Business Number of the employer who has WCBNS coverage.

As part of the registration confirmation, the employer will receive the details in the following table upon successful completion of the registration process.

**Table 3 – WCB Web Services Security Confirmation**

Information provided upon successful registration	
Item	Description
Business Partner ID	As defined in Appendix A. As most Web Services are anticipated to be directed at employers, the standard Business Partner ID will be provided by WCB Nova Scotia. This code must be included in every submission as part of the SOAP header.
Business Partner Type	As defined in Appendix A. The role type is assigned to the submitting employer upon registration into the Injury Reporting Web Service. Currently, 'EM' = Employer and 'SP' = service provider are the only accepted types. This code must be included in every submission as part of the SOAP header.
Business Partner Token	As defined in Appendix A. The token is a Globally Unique Identifier (GUID), a 16-byte number that uniquely identifies each Business Partner. This token must be included in every submission as part of the SOAP header. E.g.: 064B9C9B-EA49-4E36- A38E-5A9B84F441E4. WCBNS will provide this token.

## 4.5 Message Specifications Summary

WCB's Injury Reporting Web Service provides three basic services:

- Submission of Employer's Report of Injury
- Submission of Employer's Report of Earnings
- Submission of Connectivity Test Request

### 4.5.1 Submission of Employer's Report of Injury

The detailed requirements for completing the WCBNS Injury Report via the Web Service are captured in the field list, business rules and the schemas in the appendices of this document.

### 4.5.2 Submission of Employer's Report of Earnings

The detailed requirements for completing an Earnings Report report via the Web Service are captured in the case diagrams, the field list and the schemas in the appendices of this document.

### 4.5.3 Submission of Connectivity Test

This service will allow a vendor to validate connectivity to WCB's Web Services without the need for full report submission simplifying the integration process and testing. This service will be implemented as a separate web service from the injury reports and may only be provisioned in the conformance test environment.

## 4.6 Detailed Message Specifications and Definitions

The following messages are accepted and sent by the Web Service:

### Submission of Employer's Report of Injury

- Reported InjuryMessage (Receive only)
- Response Message for a Reported InjuryMessage
- Reported Earnings Message (Receive only)
- Response Message for a Reported Earnings Message

The business partner must construct each message as defined in the appropriate schema distributed as part of this technical specification.

The response message returned to the business partner for a submission that failed validation will be as defined in the Appendix - Sample Submission and Response Messages” and “Appendix – WCBNS-v1 System Error Responses”.

#### **4.6.1 Message Specifications: Reported Incident**

Each Reported Injury message may only contain one Employer’s Report of Injury.

The message syntax for a Reported Injury submission could vary depending on the incident or injury type being reported. The following is the only category that will be recognized:

- Employer Report with One Injured Worker

A Reported Injury message must adhere to the business rules as defined in Appendix A. – Field list and Appendix C – Schema definitions.

#### **4.6.2 Message Specifications: Reported Injury Response**

The message syntax for a response message returned to the business partner may vary but will fall under one of the following categories:

- Rejected submission based on non-compliance with the business rules as defined in the case diagrams (see Appendix A – Case Diagrams) and in the field list (see Appendix B – WCBNS-v1 Field List)
- Accepted submission based on compliance with the business rules as defined in the field list (see Appendix A – WCBNS-v1 Field List)

The response message returned to the business partner for a validated Reported Injury will include a unique identifier for the incident (also referred to as ‘Transaction Identifier’). This identifier ties the incident stored in the business partner’s system to the incident stored in WCB’s system.

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NOTE: In ‘Reported Injury’ cases, no claim number will be known to the worker. Therefore, the ‘Claim Number’, field will be blank.

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### **4.7 Submission Error Specifications**

Before a SOAP message will be accepted, it must pass through Web Service Security and the SOAP Processor / ESB to be validated against the appropriate schema. At this point, additional Business Logic validation is conducted and rule violations will be returned to the Business Partner. Only after all rule violations are corrected will the document be accepted, a completion code returned to the client and the submission processed by the WCB Claim Processing System.

Every electronic message received from the business partner will be acknowledged and responded to by an electronic reply message. If WCB Nova Scotia is unable to process the message, a deterministic error code and message shall be attached to the reply.

Submission errors fall into three basic categories:

- Server Faults
- Security Faults
- Schema Faults / Business Logic Faults

### **Server Faults**

Server Faults occur when there is a problem accessing the Web Services due to connectivity problems, errors in the WSDL or errors in SOAP encoding. A server fault is returned as a server message such as HTTP 400 or 500 depending if the error is client or server side.

A successfully completed Connectivity Test should eliminate most server faults. Any future faults would likely be attributed to internet outages, server failures, or configuration changes. For detailed information on server faults, see WCBNS-v1 Security/Server Failure Error Messages in Appendix D. – WCBNS-v1 Submission Status Response.

For additional support for internal server errors you may contact WCB's E-business Help Desk at [ehelp@wcb.ns.ca](mailto:ehelp@wcb.ns.ca).

### **Security Faults**

The Web Service security infrastructure and Web Service will protect the integrity of the service and provide the following validation:

- Verify security authentication
- Verify requested SOAP actions authorization

In case of a security fault, an appropriate response message will be generated and returned to the business partner. A security fault is returned as a server message such as HTTP 401 or 403 accompanied by a brief SOAP message. For more information, see WCBNS-v1 Security/Server Failure Error Messages.

### **Schema Faults/Business Logic Faults**

Schema Faults occur when there are schema validation errors due to incorrectly structured XML documents for all types of received messages. In addition, a reported incident message must adhere to the business rules as defined in the field list Appendix A. – WCBNS-v1 Field List. Business Logic Faults occur due to errors detected by schema validation as well as additional validation of business rules outside of the schema validation; these are largely data entry errors and are easily rectified. Appendix B. – WCBNS-v1 System Error Responses.

WCBNS-v1 Business Logic Error Codes has a full listing of all known Business Logic error messages detected by the validation outside of the schema.

## **4.8 Earnings Specifications**

Where the business partner needs to make additions to a Reported Injury report and or Earnings Section they must resubmit it to WCB for processing. However, each submission will be treated as a separate document.

# **5 Overview of Client Development & Implementation**

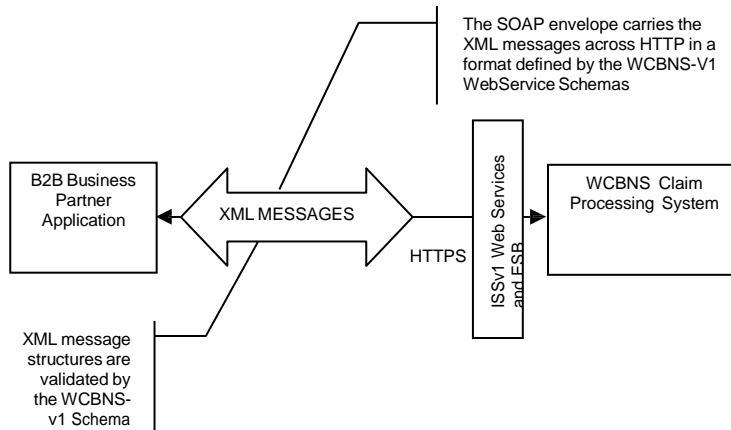
## **5.1 End-to-End WCBNS-v1 Web Service Overview**

The flow chart in “Figure 8 – WCBNS-v1 End-to-end Overview” outlines the basic process of the Injury Reporting Web Service. The steps required to develop and implement software to access the Web Service are as follows:

1. WCB Nova Scotia provides the Business Partner with this Technical Specification document and explains and discusses technical details as needed.
2. The employer/vendor, assisted by WCB Nova Scotia, registers for security access to the Injury Reporting Web Service. The Business Partner receives registration confirmation for connecting to the service.
3. Based on the Connectivity Test schema, the Business Partner establishes contact with the Web Service and ensures messages can be both sent and received. If required, WCB Nova Scotia will provide connectivity consultation.
4. The Business Partner develops client application software according to the WCBNS-v1 Technical Specification.
5. Once the client application is complete, the Business Partner conducts extensive internal testing to ensure that the system produces valid XML.
6. The Business Partner conducts a Client Validation or end-to-end test using the WCBNS CV environment. WCB approves the test results to ensure the client application can send and receive messages from the Web Service.
7. WCB Nova Scotia grants the Business Partner access to the production environment of the Injury Reporting Web Service.



**Figure 8 – WCBNS-v1 End-to-end Overview**



## 5.2 Reporting an Event via the WCBNS-v1 Web Service

The Web Service categorizes an event as falling under the following reporting type and schema, shown in the following table:

**Table 4 – WCBNS-v1 Event Reporting**

Event Report Type	Description	Use Schema
One injured worker	An event in which an injured worker may or may not have received medical attention.	wcbnsInjuryReport_v10.wsd

The Business Partner will use the above schema for the current injury report and accordingly produces a report for submission.

## 6 Client Application Validation

### 6.1 Client Application Validation Overview

When a Business Partner completes the development and testing of their application and is ready to connect to WCB's Injury Reporting Web Service, the Client Validation event can begin.

During the Client Validation, the client application connects to a dedicated Client Validation URL on the WCB production server:

<https://cvb2b.worksafens.ca>

Client validation is done in two steps:

- Connectivity test
- End-to-end functional test

### 6.2 Connectivity Test

Once registered with WCBNS Web Security, the Business Partner must execute a Connectivity Test by sending WCB the following properly structured SOAP message to the Connectivity Validation (CV) Web Service:

**Table 5 – Connectivity Test Parameters**

Client Soap Action	As defined in WCBNSSecurityHeader.xsd and Connectivity Test Schema
CV Web Service Address	<a href="https://cvb2b.worksafens.ca/ISSv1/wcb.ConnectivityTest">https://cvb2b.worksafens.ca/ISSv1/wcb.ConnectivityTest</a>
Description	Objective: The connectivity test confirms that the Business Partner is properly creating SOAP message headers with Business Partner numbers, credentials, IP addresses, etc. and is correctly entered in the web security database. The service returns a soap response to the client.
CV Response	As defined in the Connectivity Test Schema

NOTE: Consider the timestamp for this transaction response as a template for all future submissions. Any SOAP messages submitted without a similarly formatted timestamp will be rejected. The timestamp format is part of the W3C's SOAP specification.

Business Partners can perform connectivity test before they complete the development of their client application, since the client application is not used during this test. The Business Partner may request a copy of a simple client application from WCB to perform the connectivity test.

### 6.3 End-to-End Functional Testing

The second step of Client Validation is to conduct an end-to-end functional test. The following Web Service address is used for this event:

<https://cvb2b.worksafens.ca/ISSv1/ISSv1>

The Business Partner is allowed to send requests to the Web Service using the test data. These requests will be processed by the Web Service and the data will be stored in a dedicated non-production database. The client application will receive the Web Service responses.

Mandatory tests to verify compliance with the Client Application Acceptance Criteria, specified by WCB in Appendix F. - Client Application Acceptance Criteria, must be completed successfully before switching the connection to the production URL. Before the mandatory tests begin, the Business Partners are free to run as many tests on their own as they consider necessary until they feel they are ready to start the mandatory tests.

Client Validation is completed when WCB accepts the results of the applicable<sup>1</sup> mandatory tests for the client application.

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NOTE: Client Validation environment is not intended for client application system test. The WCBNS expects Business Partners to thoroughly test their applications' compliance to the WCBNS-v1 specification before they connect to Client Validation environment at the WCBNS.

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### 6.3.1 Business Partner Validation Support

During the Client Validation, WCB Nova Scotia technical staff will provide support for the Business Partners. The following types of feedback to the partners about their tests will be available on Partner's request:

***a. For a successful incident submission:***

1. The Web Services Security log contains an event recording the date and time of each successful transaction.
2. The WCB IT Team can produce a PDF version of the WCB Test Injury or Earnings Reports. It is intended for selected samples of submissions with the objective to verify that Business Partner's data maps correctly into WCB's Claim Processing System.

***b. For a rejected injury submission or failed request to the Web Service:***

The Web Services security log contains a record of each failed authentication attempt. The log record includes the originating IP address, and if submitted, the Partner ID, Partner Token and SOAP action requested.

### 6.3.2 Error handling and problem resolution

This section defines the various situations in which submissions are rejected. There are three basic points at which errors can occur. These errors are classified as:

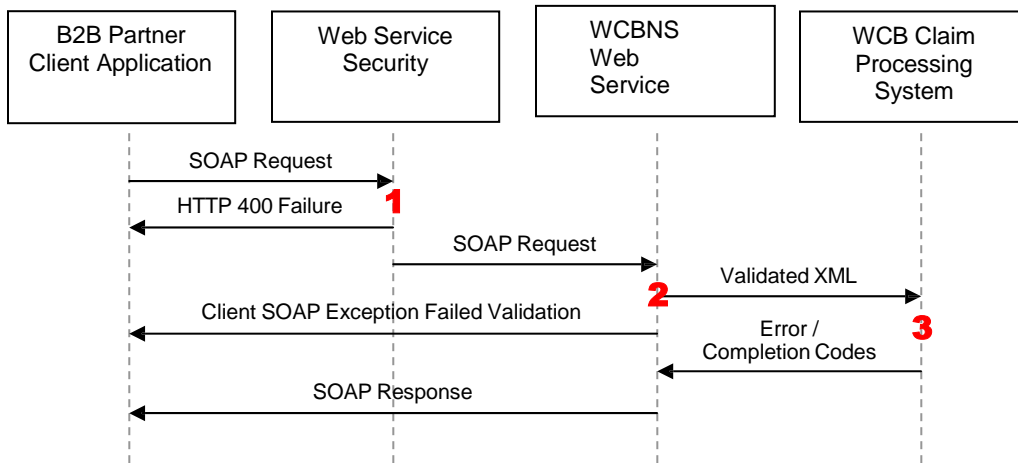
1. Connectivity or server errors
2. Security and SOAP exceptions
3. XML Schema validation and business rule errors

Note that these error capture points are identified in “Figure 9 – Error capture points in WCBNS-v1 data flow”.

The format for business rule error messages received from the WCBNS-v1 Web Service include:

- Transaction DateTime
- Transaction Correlation Identifier
- For each error
  - Error Code
  - Error Description
  - Error Node which consists of
    - Node Name

**Figure 9 – Error capture points in WCBNS-v1 data flow**



**NOTE:** 1 = Connectivity or server errors; 2 = Security and SOAP exceptions and XML Schema validation and business rule errors. 3 = Data persistence errors,

For more information, see Appendix B. – Injury Reporting Web Service System Error Responses.

When error occurs during the Client Validation, the following steps for resolution will be followed:

1. Business Partners will try to solve the problem based on the error response from the Web Service
2. Business Partners will request additional necessary information from the WCB Nova Scotia Support Team that will be available, as described in 6.3.1
3. If the problem cannot be solved in steps 1 and 2, the WCBNS Support Team will try to provide additional assistance to the Business Partner that may be necessary to resolve the problem

## **7 Connecting to the WCBNS-v1 Production environment**

Once the WCB has confirmed a successful Client Validation, security access is granted to the production WCBNS-v1 Web Service. The URL for the production environment is:

*<https://b2b.worksafens.ca/ISSv1/ISSv1>*

### **7.1 Support - WCB Nova Scotia**

WCB will support technical issues arising from errors generated by the Web Services. The support email is [ehelp@wcb.ns.ca](mailto:ehelp@wcb.ns.ca)

## Appendix A. – WCBNS-v1 Field List

The following table lists the data fields used for the WCBNS-v1 submissions under the following headings:

Field Name	– name of the data field/tag
Schema Node Name	– as defined its respective schema root tag
Field Description	– description of the data field
Business Rules/Comments	– defines all business rules
Data Type	– data type and length of data field
Possible Error (Client Fault) Code	– error codes generated during the validation of the message's XML

NOTE: Mandatory filed is always required. Field required if specific condition is met and could be blank otherwise is not considered mandatory for the purpose of this document.

### LEGEND:

IW – Injure Worker

BN – Business Number

Format: ZZ9.99 where Z represents number 0-9 with zero suppression and 9 represents a number 0-9.  
Example 0.00, 8.00, 40.00.

### Luhn Algorithm:

The algorithm proceeds in three steps.

- First, every second digit, beginning with the next-to-rightmost and proceeding to the left, is doubled. If that result is greater than nine, its digits are summed (which is equivalent, for any number in the range 10 through 18, of subtracting 9 from it). Thus a 2 becomes 4 and a 7 becomes 5
- Second, all the digits are summed
- Third, the result is divided by 10. If the remainder is zero, the original number is valid

Schema Node Name	Field Name /	Field Description	Mandatory	Business Rules/Comments	Data Type	Examples	Possible Error
	Tag Name						
<b>wcbSecurityHeaderType</b>	BusinessPartnerID	BusinessPartnerID	Yes	Provided by WCB at registration (all capitals)	String 15	DEVELOPER01	310002
	BusinessPartnerType	BusinessPartnerType	Yes	Service Provider = SP, Employer = EM	String 2	SP	
	BusinessPartnerToken	BusinessPartnerToken	Yes		String 36		
wcbCommonHeaderType	SendingSystem		Yes	Sending System Name	String		
	BN	15 digit Business number	Yes	15 digit Business Number of the employer you are submitting an Injury Report on behalf of.	String 15	899672430NW0001	310001 310003 310004
	DateTimeSubmitted		Yes	Date Time Submitted	Date Time		
	ClaimNumber	Claim Number		Claim Number if known	String 7	1234567	
	IncidentDateTime	Incident Date and Time		Incident date time. Required if Earnings Report is submitted.	Date Time		310023
	CorrelationID	Correlation ID		Correlation ID	UUID		
	LoginName	Login Name	Yes	Business Partner ID	String 25	Developer01	
	SubmittedBy	Submitted By	Yes	Business Partner Name, Business Partner ID. Comma required.	String 45	Developer, Developer01	
	CreatedByLoginName	Created By Login Name	Yes	The same as Login Name.	String 25	DEVELOPER01	

Schema Node Name	Field Name /	Field Description	Mandatory	Business Rules/Comments	Data Type	Examples	Possible Error
	Tag Name						
<b>WorkerInformation/</b>							
FullName	FirstName	IW First Name	Yes		String 25	Jane	
FullName	MiddleInitial			New to schema			
FullName	LastName	IW Last Name	Yes	French characters not acceptable?	String 20	Smith	
FieldedAddress	StreetNumber						
FieldedAddress	StreetName						

FieldedAddress	UnitNumber						
FieldedAddress	BoxNumber						
FieldedAddress	RuralRouteNumber						
Region	CityName	IW City	Yes		String 25	Halifax	
Region	Province	IW Province or State	Yes	Must be valid Province or State code. Format AA.	String 2	NS – province ME - state	
Region	CountryTypeCode						
Region	PostalCode	IW Postal Code or ZIP Code	Yes	Must be valid Postal Code if province selected. Format A9A 9A9 Must be valid Zip Code if state selected. Format 99999.	String 7		
HomePhone	AreaCode	IW home phone area code		Required if home phone number provided. Format 999.	String 3 Min 3		
HomePhone	Number	IW home phone number.		Format 9999999	String 7 Min 7	888-7777	
HomePhone	NumberExt	IW home phone number extension.		Format 9999.(See TelephoneType)	String 4		
WorkPhone	AreaCode	IW work phone area code.		Required if work phone number provided.	String 3 Min 3	902	
WorkPhone	Number	IW work phone number.		Format 9999999	String 7 Min 7	888-6666	
WorkPhone	NumberExt	IW work phone number extension.		Format 9999	String 4		
CellPhone	AreaCode	IW cell phone area code.		Required if cell phone number provided.	String 3	902	
				Format 999	Min 3		
CellPhone	Number	IW cell phone number.		Format 9999999	String 7	888-9999	
					Min 7		
CellPhone	NumberExt	IW cell phone number extension.		Format 9999	String 4		
	Occupation	IW occupation description.		Optional	String 50		
	HealthCard	IW Health Card Number.		Either Health Card or SIN number is required. Format 9999 999 999. Must pass Lunh	String 12		310001



	SIN	IW SIN number.		Either SIN or Health Card number is required. Format 999-999-999. Must pass Lunh algorithm (explanation below.)	String 12		310001 310021
	DateOfBirth	IW Date of Birth.	Yes	Must be less than Today. Birthday Year must be less than current year. Format includes Date only YYYY-MM-DD	Date	2001-12-01	
	Gender	IW code that uniquely identifies gender. Valid Codes 'M' = Male 'F' = Female	Yes	Valid code must be selected.	String 1	F	
<b>InjuryInformation/</b>							
SpecificIncident	SpecificIncidentIndicator	Injury occurred from the specific incident		Must be set to Y if Specific Incident chosen.	YesNo	Y	
SpecificIncident	SpecificIncidentDateTime	Date and time when the specific incident injury occurred.		Required if Specific Incident selected "Y". Format includes date and Time.	Date Time	2016-11-05 T10:15:00-00:00	
OverTime	OverTimeIndicator	Injury occurred over time		Must be set to Y if Overtime chosen.	YesNo	N	
OverTime	OverTimeDateSymptoms Noticed	Over period of time date symptoms first noticed.		Required if Overtime Indicator selected "Y". Format includes date and Time.	Date	2016-11-05	
PartOfBody	Description	What body part was injured?	Yes		String 86	Back both sides.	
	LeftSide						
PartOfBody	LeftSide	Left side checkbox		At least one Part Of Body must be selected (left right upper lower)	Boolean	FALSE	310006
PartOfBody	RightSide	Right side checkbox		At least one Part Of Body must be selected (left right upper lower)	Boolean	FALSE	310006
PartOfBody	UpperBody	Upper Body side checkbox		At least one Part Of Body must be selected (left right upper lower)	Boolean	TRUE	310006
PartOfBody	LowerBody	Lower Body side checkbox		At least one Part Of Body must be selected (left right upper lower)	Boolean	FALSE	310006
	HappenedHow	How did the injury happen? List any and all weights, distances, movements or	Yes		String min 20 max 400	Lifting package from the floor.	

		exposure to noise or chemicals.					
InjuryLocation	CityName	City the injury occurred.	Yes		String 25	Halifax	
InjuryLocation	Province	Province the injury occurred. Valid values are any Canadian Province Code plus "OUTFOFCOUNTRY" and "ATSEA"	Yes	Valid value must be selected.	String min 2 max 12	ATSEA	
InjuryLocation	CountryTypeCode						
InjuryLocation	PostalCode						
InjuryLocation	OccurrenceCounty	County the injury occurred.		County Description of selected County Code. Lookup table provided.	String 30	Halifax County	
	PersonFactorDescription	Explanation If a person or factor other than employer or coworkers contributed to the cause of injury or illness.			String 100	Yes, resident.	
MedicalAttention	MedicalAttentionSought	Was the medical attention sought Yes or No checkbox.	Yes		YesNo	Y	
MedicalAttention	MedicalAttentionSoughtDate	Date the medical attention was sought.		Format includes Date only.	Date	2016-11-05	310007
MedicalAttention	NameOfDoctorOrFacility	Name of Doctor Or Medical Facility.		Required if medical attention sought is true.	String 45	Dr. Practitioner	310007
MedicalAttention	LocationOfDoctorOrFacility	Location of Doctor Or Medical Facility.		Required if medical attention sought is true.	String35	Halifax	310007
MedicalAttention/ TelephoneOfDoctorOrFacility	AreaCode	Doctor or Medical Facility phone area code.		Required if Telephone Number provided. Format 999	String Min 3	902	
MedicalAttention/ TelephoneOfDoctorOrFacility	Number	Doctor or Medical Facility phone area code.		Format 9999999.	String 7 Min 7	4916666	
MedicalAttention/ TelephoneOfDoctorOrFacility	NumberExt	Doctor or Medical Facility phone extension.		Format 9999	String 4		
LostTime	WorkerLostTimeIndicator	Did the worker lose time because of this injury or illness?	Yes		String	Y	

LostTime	DateTimeLostTimeStarted	The date and time when time loss started.		Required if worker lost time is Y.	DateTime	2016-11-05 T00:00:00-00:00	310008
LostEarnings	WorkerLostEarningsIndicator	Did the worker lost earnings because of this injury or illness.	Yes		String	Y	
LostEarnings	DateTimeLostEarningsStarted	The date and time when earnings-loss started.		Required if Worker Lost Earnings is Y.	DateTime	2016-11-05 T00:00:00-00:00	310009
	WorkerType	The worker type. Valid Values are:		Valid value must be selected or leaved blank.	String 17	None	
		"PROPRIETOR" "PARTNER" "OFFICERORDIRECTOR" "NONE"					
	WorkerLivesWithOfficer	Indicate if IW lives in the same household of any proprietor or partner or active officer of the company.			Boolean	FALSE	
		Yes – true					
		No - false					
ReportedTo	DateReported	Date the accident was reported.	Yes	Reported Date cannot be in the future.	Date	2016-11-05	
ReportedTo	Name	Name of person to whom the accident was reported at the place of employment.			String 45	Mr Smith.	
ReportedTo	Title	Title of person to whom the accident was reported at the place of employment.			String 25	Manager.	
ReportedTo/ Telephone	AreaCode	Phone Area Code of person to whom the accident was reported at the place of employment.		Required if Telephone Number provided. Format 999. \d{3}	String 3	902	
ReportedTo/ Telephone	Number	Phone Number of person to whom the accident was reported at the place of		Format 9999999. \d{7}	String 7 Min 7	8883333	

		employment.					
ReportedTo/ Telephone	NumberExt	Telephone Extension of person to whom the accident was reported at the place of employment.		Format 9999	String 4	1234	
ReportedTo	DelayInReportingDescription	Short explanation in any delay in reporting.			String 149	IW fail to report incident to manager.	
<b>JobInformation/</b>	MainJobDescription	Over Period of Time section in the Injury Report. What are the IW main job tasks?		Required if Injury Occurred Over Period of Time	String Min 20 Max 250		310010
	DominantHand	Is the IW left or right hand dominant? Valid Values are"LEFT" "RIGHT"		Required if Injury Occurred Over Period of Time	String 5	RIGHT	310010
	TimeEmployedCurrent Position	How long has the IW been employed in this specific job position.		Required if Injury Occurred Over Period of Time	String 20	14 months	310010
	PreviousPositionDescription	IW previous position if IW employed less than 90 days in current position.			String 35		
	AmountOfOvertime	How much overtime did the worker perform in the 90- 180 days before this injury or illness occurred?			String 20	N/A  35 hours.	
	ResponsibilityChange Description	Explanation of any changes in the IW responsibilities in the past 90-180 days (changes in duties or workload, a leave of absence).			String 100		
<b>EarningsInformation/</b>	TwelveMonthsPrior	Has the worker been employed with this company for the 12 months preceding the earnings loss?	Yes		YesNo	Y	

EmploymentOccupation	EmploymentType	Valid values PERMANENT" "CASUAL" "SEASONAL"	Yes	Employment type section A. Valid value must be selected.	String 9	PERMA NENT	
EmploymentOccupation	SubContractor	Sub-contractor		Employment Type section B	Boolean	FALSE	
EmploymentOccupation	VehicleOperator	Vehicle Owner / Operator		Employment Type section B	Boolean	FALSE	
EmploymentOccupation	CourierService	Courier Service					
EmploymentOccupation	Logging	Logging / Chain Saw Operator		Employment Type section B	Boolean	FALSE	
EmploymentOccupation	SelfEmployed	Self-Employed		Employment Type section B	Boolean	FALSE	
EmploymentOccupation	Other	Other		Employment Type section B	Boolean	FALSE	
EmploymentOccupation	OtherDescription	Description of other occupation.		Required if Employment Occupation Other is true.	String 25		310011
	OriginalEmploymentStart Date	The date the original employment began for part- time, seasonal or casual worker.		Required If Employment Type is "CASUAL" Or Employment Type is "SEASONAL". Format includes Date only.	Date	2016-11- 01	310012
NormalGrossEarnings	Amount	IW normal gross earnings at the time of injury for the period more than one year.		Required if Gross Earnings One Year or Less not provided. Format \$ZZZ,ZZZ,ZZ9.99	String 15	\$2,800.0 0	310013
NormalGrossEarnings	TimePeriod	Normal gross earnings for time period. Valid values: PERHOUR" "PERDAY" "PERWEEK" "BIWEEKLY" "PERMONTH" "OTHER" Description of time period for normal gross earnings for other.		Required if Normal Gross Earnings provided. Valid value must be selected or leaved blank	String 8	PERMO NTH	310014
NormalGrossEarnings	OtherDescription	Description of Other earnings.		Required If Normal Gross Earnings Time Period equals "OTHER".	String 50		310015
NormalGrossEarnings	OneYearOrLess	IW gross earnings for the period one year or less.		Required if Normal Gross Earnings not provided. Format \$ZZZ,ZZZ,ZZ9.99.	String 15		310013
NormalGrossEarnings	OneYearOrLessStartDat e	IW gross earnings for the period one year or less Start		Required if Gross Earnings One Year or Less provided. Format	Date	2016-11- 01	310016

		Date.		includes Date only.			
NormalGrossEarnings	OneYearOrLessEndDate	IW gross earnings for the period one year or less End Date.		Required if Gross Earnings One Year or Less provided. Must be greater than Gross Earnings One Year Or Less Start Date. Format includes Date only.	Date	2016-11-05	310016
UsualHoursDaysWorked	HoursDaysWorked	Usual number of hours / days worked.	Yes	Format ZZ9.99	String 6		
UsualHoursDaysWorked	WorkedTimeLength	Time interval for usual number of hours or days. Valid values: "HOURS" "DAYS"	Yes	Valid value must be selected.	String 5		
UsualHoursDaysWorked	WorkedTimePeriod	Period Time for usual number of hours or days. Valid values: "PERDAY" "PERWEEK" "OTHER"		Valid value must be selected or leaved blank.	String 7		
UsualHoursDaysWorked	OtherDescription	Description for other time period for usual number of hours or days.		Required If Worked Time Period equals "OTHER"	String 50		310017
UsualHoursDaysWorked/UsualDaysWorked	Sun	Usual days of work – Sunday.			Boolean	FALSE	
UsualHoursDaysWorked/UsualDaysWorked	Mon	Usual days of work – Monday			Boolean	TRUE	
UsualHoursDaysWorked/UsualDaysWorked	Tues	Usual days of work – Tuesday.			Boolean	TRUE	
UsualHoursDaysWorked/UsualDaysWorked	Wed	Usual days of work – Wednesday.			Boolean	TRUE	
UsualHoursDaysWorked/UsualDaysWorked	Thur	Usual days of work – Thursday.			Boolean	TRUE	
UsualHoursDaysWorked/UsualDaysWorked	Fri	Usual days of work – Friday.			Boolean	TRUE	
UsualHoursDaysWorked/UsualDaysWorked	Sat	Usual days of work – Saturday.			Boolean	FALSE	
	TaxDeductionCode	IW tax deduction (TD) code.	Yes		String 10	1	
	NumberOfHoursScheduled	Number of hours scheduled on day time/earnings loss began.	Yes	Format Z9.99.	String 5	7.5	
	NumberOfHoursWorked	Number of hours	Yes	Format Z9.99.	String 5	0	

		worked on day time/earnings loss began.					
	NumberOfHoursPaid	Number of hours paid on day time/earnings loss began.	Yes	Format Z9.99.	String 5	7.5	
ReturnToWork	ReturnToWorkIndicator	Did the IW return to work after the injury or onset of symptoms Yes No checkboxes.  No –false.	Yes		YesNo	Y	
ReturnToWork	ReturnToWorkDateTime	Returned to work date and time.		Required if Return To Work is true. Format includes Date and time	Date time	2016-11-05T00:00:00-04:00	310018
ReturnToRegularDuties	ReturnToRegularDutiesIndicator	Did the IW return to regular duties Yes No checkboxes. Yes- true. No –false.	Yes		YesNo	Y	
ReturnToRegularDuties	ReturnToRegularDutiesDateTime	Date and time the IW returned to regular duties.		Required if Return To Regular Duties is Y. Format includes Date and time	Date time	2016-11-05T00:00:00-04:00	310019
PaymentsAnticipated	PaymentsAnticipatedIndicator	Will the employers be making any payments to the IW while the IW is off work due to injury or illness Yes No checkboxes.	Yes		YesNo	N	
PaymentsAnticipated	TypeOfBenefitsPaid	Type of benefits the employer will pay to the IW while the IW is off work due to the injury or illness.		Required if Payments Anticipated is true.	String 30	Sick Benefits	310020
PaymentsAnticipated	LengthOfPayments	How long the employer will pay to the IW while the IW is off work due to the injury or illness.		Required if Payments Anticipated is true.	String 30	7.50 Hours	310020
	GeneralExplanation	Any additional injury/illness information the employer feel is relevant.			String 800	IW remained stable with no further issues. Expected RTW in 1	

						week.	
<b>Declaration / IRDeclarationConsent</b>	EmployerDeclare	Declaration that the information contained are true and complete to the best of my knowledge or disagreement with Info provided.	Yes	Valid values are: "Agree", "Disagree".	String	Agree	
	EmployerDeclareName	The person agree or disagree name.					
	EmployerDeclareDate	Declaration Date.			Date		
	Telephone	Telephone		Area Code + phone number + extension (optional).	String	9024918707	
	WorkerDeclare	Declaration that the information contained are true and complete to the best of worker knowledge or disagreement with Info provided.		N/A	String	Disagree	
	WorkerDeclareName	The worker agree or disagree name.		N/A	String		
	WorkerDeclareDate	Worker Declare Date		N/A	Date		
	WorkerConsent	Worker Consent to submit this form?	Yes		Boolean	True	
	CopyToWorker	Copy available to the Worker?	Yes		Boolean	True	
<b>Declaration/ERDeclaration</b>	EarningsConfirmName	Confirmed by name Earnings Information is correct.	Yes	Earnings Report Declaration Section present only with Earnings Report Type	String 50	Harry HR	
	EarningsConfirmDate	Date when Confirmed.	Yes		Date	2016-11-05	
<b>ReportProperty</b>	Name	WCB Internal Report Name. Valid values: "WCBInjuryReportForm" "WorkerEarningsForm"	Yes	Report name must be selected.	String 20	Worker Earnings Form	



## Appendix B. – WCBNS-v1 System Error Responses

### WCBNS-v1 Business Logic Error Codes

The following table summarizes the possible errors that can arise from WCBNS-v1 validation **after the XML document is validated by the schema.**

**Table 6 – Business Logic Error Codes**

Error Message Number	Error Message Text	Field List Schema Node #	Associated Schema Node Name
310001	Reporting Employer Business Number is invalid.	BN Business Number (division)	<wcbCommonHeader>
310002	Submitting Provider Identifier is invalid.		
310003	Reporting Employer Business Number is invalid.	BN Business Number (division)	<wcbCommonHeader>
310004	Reporting Employer Business Number is no longer active	BN Business Number (division)	<wcbCommonHeader>
310005	Valid SIN or Health Card or both must be supplied.	SIN and Health Card	<WorkerInformation>
310006	At least one Part of Body checkbox (eg; left, right) must be selected.	LeftSide RightSide UpperBody LowerBody	<InjuryInformation> <PartOfBody>
310007	If Medical attention sought is Yes, then Doctor or Facility and location are required.	MedicalAttentionSoughtDate NameOfDoctorOrFacility LocationOfDoctorOrFacility (FieldedAddress)	<InjuryInformation><MedicalAttention>
310008	Where worker lost time then date and time when time loss started is required.	WorkerLostTimeIndicator	<InjuryInformation><LostTime>
310009	Where worker lost earnings then date and time when earnings started is required.	WorkerLostEarningsIndicator	<InjuryInformation><LostEarnings>
310010	If Over a Period of time was chosen, worker's main tasks, dominant hand, and length of time in job/position are required.	MainJobDescription DominantHand TimeEmployedCurrentPosition	<JobInformation>
310011	If employment type is Other, then description is required.	OtherDescription	<EarningsInformation>

310012	Date employment began is required for non-permanent workers.	OriginalEmploymentStartDate	<EarningsInformation>
310013	Normal Gross Earning (either Section A or B) was missed.		<EarningsInformation><NormalGrossEarnings>
Error Message Number	Error Message Text	Field List Schema Node #	Associated Schema Node Name
310014	In Section A if Normal Gross Earnings is provided then a pay period must be selected (e.g. per day, per hour etc).	TimePeriod	<EarningsInformation><NormalGrossEarnings>
310015	In Section A if Other is selected for Normal Gross Earnings then the other description must be filled in.	Other Description	<EarningsInformation><NormalGrossEarnings>
310016	Gross Earnings for the period From and To dates are required.	OneYearOrLessStartDate OneYearOrLessEndDate	<EarningsInformation><NormalGrossEarnings>
310017	If number of hours/days is Other, then description is required.	OtherDescription	<EarningsInformation><UsualHoursDaysWorked>
310018	If the worker returned to work, then date and time are required.	ReturnToWorkDateTime	<EarningsInformation><ReturnToWork>
310019	If the worker returned to regular duties, then date and time are required.	ReturnToRegularDutiesDateTime	<EarningsInformation><ReturnToRegularDuties>
310020	If you will be making payments to the worker while they are off work, type and length of payments are required.	TypeOfBenefitsPaid LengthOfPayments	<EarningsInformation><PaymentsAnticipated>
310021	The Social Insurance Number Entered is not valid	SIN	<WorkerInformation>
310022	The Health Cardnumber entered is not valid	HCM	<workerinformation>
310023	Injury Date Required	IncidentDateTime	<wcbCommonHeader>

## WCBNS-v1 Failure Messages

The following table summarizes possible error codes provided in the response message from the WCBNS-v1 Web Service:

**Table 7 – WCBNS-v1 Failure Message**

Error Message	Description	Resolution
<p><b>HTTP Status: 200</b></p> <pre>&lt;soap:Envelope xmlns:soap="http://schemas.xmlsoap.org/soap/envelope/"&gt;   &lt;soap:Body&gt;     &lt;ns0:ReportResponse xmlns:ns0="http://b2b.worksafens.ca/ISSv1/ReportResponse"&gt;       &lt;ErrorNotification&gt;         &lt;TransactionDateTime&gt;2017-03-22T14:41:55-03:00&lt;/TransactionDateTime&gt;         &lt;TransactionIdentifier&gt;d70851b0-0f26-11e7-b890-0050569426e7&lt;/TransactionIdentifier&gt;         &lt;Error&gt;           &lt;ErrorCode&gt;310021&lt;/ErrorCode&gt;           &lt;ErrorDescription&gt;The Social Insurance Number Entered is not valid.&lt;/ErrorDescription&gt;         &lt;/Error&gt;       &lt;/ErrorNotification&gt;     &lt;/ns0:ReportResponse&gt;   &lt;/soap:Body&gt; &lt;/soap:Envelope&gt;</pre>	<p>Example Business Validation Error</p>	<p>See section “4.4.1 - Registering with WCB Web Services Security” and “Appendix B – WCBNS-v1 Field List”</p>
<p><b>HTTP Status: 400</b></p> <pre>&lt;soap:Envelope xmlns:soap="http://schemas.xmlsoap.org/soap/envelope/"&gt;   &lt;soap:Body&gt;     &lt;ns0:ReportResponse xmlns:ns0="http://b2b.worksafens.ca/ISSv1/ReportResponse"&gt;       &lt;ErrorNotification&gt;         &lt;TransactionDateTime&gt;2017-03-23T09:12:09.477-03:00&lt;/TransactionDateTime&gt;         &lt;TransactionIdentifier&gt;edcb2df0-0fc1-11e7-a269-005056940d7c&lt;/TransactionIdentifier&gt;         &lt;Error&gt;           &lt;ErrorCode&gt;-1&lt;/ErrorCode&gt;           &lt;ErrorDescription&gt;Header XML Validation Error.&lt;/ErrorDescription&gt;         &lt;/Error&gt;       &lt;/ErrorNotification&gt;     &lt;/ns0:ReportResponse&gt;   &lt;/soap:Body&gt; &lt;/soap:Envelope&gt;</pre>	<p>XML Validation Error – Header</p>	

Error Message	Description	Resolution
<p><b>HTTP Status: 400</b></p> <pre>&lt;soap:Envelope xmlns:soap="http://schemas.xmlsoap.org/soap/envelope/"&gt;   &lt;soap:Body&gt;     &lt;ns0:ReportResponse xmlns:ns0="http://b2b.worksafens.ca/ISSv1/ReportResponse"&gt;       &lt;ErrorNotification&gt;         &lt;TransactionDateTime&gt;2017-03-23T09:14:25.758-03:00&lt;/TransactionDateTime&gt;         &lt;TransactionIdentifier&gt;3ffd33c0-0fc2-11e7-a269-005056940d7c&lt;/TransactionIdentifier&gt;         &lt;Error&gt;           &lt;ErrorCode&gt;-1&lt;/ErrorCode&gt;           &lt;ErrorDescription&gt;Body XML Validation Error.&lt;/ErrorDescription&gt;         &lt;/Error&gt;       &lt;/ErrorNotification&gt;     &lt;/ns0:ReportResponse&gt;   &lt;/soap:Body&gt; &lt;/soap:Envelope&gt;</pre>	XML Validation Error – Body	
<p><b>HTTP Status: 500</b></p> <pre>&lt;soap:Envelope xmlns:soap="http://schemas.xmlsoap.org/soap/envelope/"&gt;   &lt;soap:Body&gt;     &lt;soap:Fault xmlns:soap="http://www.w3.org/2003/05/soap-envelope"&gt;       &lt;faultcode&gt;soap:Server&lt;/faultcode&gt;       &lt;faultstring&gt;Undeclared namespace prefix "soopenx" at [row,col {unknown-source}]: [3,19]&lt;/faultstring&gt;     &lt;/soap:Fault&gt;   &lt;/soap:Body&gt; &lt;/soap:Envelope&gt;</pre>	Sample - Invalid SOAP Structure (SOAP Fault)	
<p><b>HTTP Status: 500</b></p> <pre>&lt;soap:Envelope xmlns:soap="http://schemas.xmlsoap.org/soap/envelope/"&gt;   &lt;soap:Body&gt;     &lt;soap:Fault xmlns:soap="http://www.w3.org/2003/05/soap-envelope"&gt;       &lt;faultcode&gt;soap:Server&lt;/faultcode&gt;       &lt;faultstring&gt;The given SOAPAction SubmitNothing does not match an operation.&lt;/faultstring&gt;     &lt;/soap:Fault&gt;   &lt;/soap:Body&gt; &lt;/soap:Envelope&gt;</pre>	Sample - Invalid SOAP Action (SOAP Fault)	

Error Message	Description	Resolution
<p><b>HTTP Status: 500</b></p> <pre>&lt;soap:Envelope xmlns:soap="http://schemas.xmlsoap.org/soap/envelope/"&gt;   &lt;soap:Body&gt;     &lt;ns0:Fault&gt;       &lt;ns0:faultcode&gt;soap:Server&lt;/ns0:faultcode&gt;       &lt;ns0:faultstring&gt;Message Id b8a9fa40-0fc9-11e7-9f8b-005056940d7c ; Server Error: Service Unavailable.&lt;/ns0:faultstring&gt;     &lt;/ns0:Fault&gt;   &lt;/soap:Body&gt; &lt;/soap:Envelope&gt;</pre>	<p>Internal WCB Server Error. The details of this event are logged internally.</p>	<p>Contact the WCBNS at <a href="mailto:help@wcb.ns.ca">help@wcb.ns.ca</a> report a server failure.</p>

## Appendix C. – WCBNS Web Services Schemas

### WCBNS Web Services Schemas Overview

A schema provides the means to define the structure, content, and semantics of a message (e.g. defines what fields comprise the message, what data type they should be, whether they are optional or mandatory). Using the associated schema to the particular type of message, a Business Partner application will be able to validate the message before it is submitted to the WCBNS-v1 Web Service, which in turn will perform the same schema validations upon receiving the message. The following table defines the message schemas that comprise the entire WCBNS Web Services Schema.

**Table 10– WCBNS-v1 Web Services Schema Overview**

Schema	Description	Applicable Cases
<b>System Schemas</b>		
wcbnsInjuryReport_v10.wsdl	Defines the interchange specification for the service.	
Header_v10.xsd	Refers to security credentials that will be passed in the soap header call to the service.	
<b>Connectivity Test Schema</b>		
ConnectivityTestRequest_v10.xsd	Defines a test connectivity request message but does not include any employer report information, simplifying integration testing processes.	
<b>Incident Submission Schemas</b>		
InjuryReport_v10.xsd	Workplace injury report.	<ul style="list-style-type: none"> <li>A. Common Submission Fields</li> <li>D. Worker Incident</li> <li>E. Worker Contact</li> <li>F. Worker Wage</li> <li>G. Return to Work Details</li> <li>H. Payroll Contact</li> </ul>
<b>System Response Schemas</b>		
ReportResponse_v10.xsd	Refers to the format of a response message for incident submissions	

## WCBNS-v1 WSDL Explained

These Web Service (WCBNS-v1 Service) feature a single port. This port has both an abstract definition (WCBNS-v1 PortType) and a concrete definition (WCBNS-v1 BindingInterface). Port types specify the software interface and are composed of collections of operations (the individual method signatures) that define the ordered exchanges of messages (SubmitIncident and SubmitEarnings for example).

Bindings say which protocols are used by the port, including the packaging protocol (SOAP in this case). A message is a logical collection of named parts (data values) of a particular type. The type of part is defined using some standard data typing mechanism such as the XML Schema specification.

Web Service: WCBNS-v1 Service

Port: Abstract WCBNS-v1 PortType, Concrete: WCBNS-v1 BindingInterface

Operations: SubmitIncident, SubmitEarnings

Messages: SecHeaderMessage, IncidentMessage, IncidentResponseMessage, EarningsMessage , EarningsResponseMessage.

The WSDL preamble defines the basic elements of the service such as SOAP version, namespaces and routing definitions.

```
<?xml version="1.0" encoding="utf-8"?>
<definitions
  targetNamespace="http://b2b.worksafens.ca/ISSv1"
  xmlns:soap="http://schemas.xmlsoap.org/wsdl/soap/"
  xmlns="http://schemas.xmlsoap.org/wsdl/"
  xmlns:s0="http://b2b.worksafens.ca/ISSv1/wsHeader"
  xmlns:s1="http://b2b.worksafens.ca/ISSv1/WCBNSReportForm"
  xmlns:s2="http://b2b.worksafens.ca/ISSv1/ReportResponse"
  xmlns:s3="http://b2b.worksafens.ca/ISSv1/wcb.ConnectivityTest"
  xmlns:version="http://b2b.worksafens.ca/Version"
  xmlns:xsd="http://www.w3.org/2001/XMLSchema"
  xmlns:tns="http://b2b.worksafens.ca/ISSv1"
```

```

>
<types>
  <schema xmlns="http://www.w3.org/2001/XMLSchema">
    <import namespace="http://b2b.worksafens.ca/ISSv1/wsHeader"
schemaLocation="Header_v10.xsd"/>
    <import namespace="http://b2b.worksafens.ca/ISSv1/WCBNSReportForm"
schemaLocation="InjuryReport_v10.xsd"/>
    <import namespace="http://b2b.worksafens.ca/ISSv1/ReportResponse"
schemaLocation="ReportResponse_v10.xsd"/>
    <import namespace="http://b2b.worksafens.ca/ISSv1/wcb.ConnectivityTest"
schemaLocation="ConnectivityTestRequest_v10.xsd"/>
  </schema>
  <schema targetNamespace="http://b2b.worksafens.ca/ISSv1/Version"
xmlns="http://www.w3.org/2001/XMLSchema">
    <element name="Version">
      <complexType>
        <all>
          <element name="number" type="string" default="10" maxOccurs="1"
minOccurs="1"/>
        </all>
      </complexType>
    </element>
  </schema>
</types>
<message name="SecHeaderMessage">
  <part name="version" element="version:Version"/>
  <part name="inSecPart" element="s0:WCBHeader"/>
</message>
<message name="IncidentMessage">
  <part name="inIncident" element="s1:WCBReportForm"/>
</message>
<message name="IncidentResponseMessage">
  <part name="outIncident" element="s2:ReportResponse"/>
</message>
<message name="EarningsMessage">
  <part name="inIncident" element="s1:WCBReportForm"/>

```



```

</message>
<message name="EarningsResponseMessage">
  <part name="outEarnings" element="s2:ReportResponse"/>
</message>
<message name="ConnectivityTestMessage">
  <part name="inConnectivityTest" element="s3:ConnectivityTestRequest"/>
</message>
<message name="ConnectivityTestResponseMessage">
  <part name="outConnectivityTest" element="s3:ConnectivityTestResponse"/>
</message>
<portType name="ISSv1PortType">
  <operation name="SubmitIncident">
    <input message="tns:IncidentMessage"/>
    <output message="tns:IncidentResponseMessage"/>
  </operation>
  <operation name="SubmitEarnings">
    <input message="tns:EarningsMessage"/>
    <output message="tns:EarningsResponseMessage"/>
  </operation>
  <operation name="SubmitConnectivityTest">
    <input message="tns:ConnectivityTestMessage"/>
    <output message="tns:ConnectivityTestResponseMessage"/>
  </operation>
</portType>
<binding name="ISSv1BindingInterface" type="tns:ISSv1PortType">
  <soap:binding transport="http://schemas.xmlsoap.org/soap/http"
    style="document" />
  <operation name="SubmitIncident">
    <soap:operation soapAction="SubmitIncident" style="document" />
    <input>
      <soap:body use="literal" />
      <soap:header message="tns:SecHeaderMessage" part="inSecPart" use="literal" />
    </input>
    <output>
      <soap:body use="literal" />
    </output>
  </operation>
</binding>

```

```

</operation>
<operation name="SubmitEarnings">
  <soap:operation soapAction="SubmitEarnings" style="document" />
  <input>
    <soap:body use="literal" />
    <soap:header message="tns:SecHeaderMessage" part="inSecPart" use="literal" />
  </input>
  <output>
    <soap:body use="literal" />
  </output>
</operation>
<operation name="SubmitConnectivityTest">
  <soap:operation soapAction="SubmitConnectivityTest" style="document" />
  <input>
    <soap:body use="literal" />
    <soap:header message="tns:SecHeaderMessage" part="inSecPart" use="literal" />
  </input>
  <output>
    <soap:body use="literal" />
  </output>
</operation>
</binding>
<service name="ISSv1">
  <documentation>ISSv1 message interchange with WCB.</documentation>
  <port name="ISSv1Port" binding="tns:ISSv1BindingInterface">
    <soap:address location="https://b2b.worksafens.ca/ISSv1/ISSv1"
publishedEndpointUrl="https://b2b.worksafens.ca/ISSv1/ISSv1" />
  </port>
</service>
</definitions>

```

### WCBNS-v1 System Header Schema

```

<?xml version="1.0" encoding="utf-8" ?>
<xs:schema xmlns="http://b2b.worksafens.ca/ISSv1/wsHeader"
  xmlns:tns="http://b2b.worksafens.ca/ISSv1/wsHeader"

```

```

    xmlns:xs="http://www.w3.org/2001/XMLSchema"
    targetNamespace="http://b2b.worksafens.ca/ISSv1/wsHeader">
<xs:element name="WCBHeader" >
  <xs:complexType>
    <xs:sequence>
      <xs:element name="wcbSecurityHeader" type="wcbSecurityHeaderType"/>
      <xs:element name="wcbCommonHeader" type="wcbCommonHeaderType"/>
    </xs:sequence>
  </xs:complexType>
</xs:element>
<xs:complexType name="wcbSecurityHeaderType">
  <xs:sequence>
    <xs:element name="BusinessPartnerID" type="xs:string" minOccurs="1" maxOccurs="1"/>
    <xs:element name="BusinessPartnerType" type="xs:string" minOccurs="1" maxOccurs="1"/>
    <xs:element name="BusinessPartnerToken" type="xs:string" minOccurs="1" maxOccurs="1"/>
  </xs:sequence>
</xs:complexType>
<xs:complexType name="wcbCommonHeaderType">
  <xs:sequence>
    <xs:element name="SendingSystem" type="xs:string" />
    <xs:element name="BN" type="BN" />
    <xs:element name="DateTimeSubmitted" type="xs:dateTime" />
    <xs:element name="ClaimNumber" type="ClaimID" minOccurs="0"/>
    <xs:element name="IncidentDateTime" type="xs:dateTime" minOccurs="0"/>
    <xs:element name="CorrelationID" type="UUID" minOccurs="0"/>
    <xs:element name="LoginName" type="xs:string" />
    <xs:element name="SubmittedBy" type="SubmittedByType" />
    <xs:element name="CreatedByLoginName" type="xs:string" />
  </xs:sequence>
</xs:complexType>
<xs:simpleType name="UUID">
  <xs:restriction base="xs:string">
    <xs:length value="36" fixed="true" />
    <xs:pattern value="[0-9a-fA-F]{8}-[0-9a-fA-F]{4}-[0-9a-fA-F]{4}-[0-9a-fA-F]{4}-[0-9a-fA-F]{12}"
  />
  </xs:restriction>

```

```
</xs:simpleType>
<xs:simpleType name="BN">
  <xs:restriction base="xs:string">
    <xs:minLength value="15"/>
    <xs:maxLength value="15"/>
  </xs:restriction>
</xs:simpleType>
<xs:simpleType name="ClaimID">
  <xs:restriction base="xs:string">
    <xs:maxLength value="7"/>
    <xs:pattern value="[0-9]+" />
  </xs:restriction>
</xs:simpleType>
<xs:simpleType name="SubmittedByType">
  <xs:restriction base="xs:string">
    <xs:pattern value="^[^,]+,[^,]+" />
  </xs:restriction>
</xs:simpleType>
</xs:schema>
```

## WCBNS-v1 System Query / Response Schemas

### *InjuryReport\_v10.xsd*

```
<?xml version="1.0" encoding="utf-8" ?>
<xs:schema xmlns="http://b2b.worksafens.ca/ISSv1/WCBNSReportForm"
  xmlns:tns="http://b2b.worksafens.ca/ISSv1/WCBNSReportForm"
  xmlns:xs="http://www.w3.org/2001/XMLSchema"
  targetNamespace="http://b2b.worksafens.ca/ISSv1/WCBNSReportForm">
  <!-- Types are defined at the end of the xs-->

  <!-- I would like to structure this more like the following... -->
  <xs:element name="WCBReportForm" >
    <xs:complexType>
      <xs:choice>
        <xs:element name="WCBNSInjuryReportForm"           type="InjuryReportForm" />
        <xs:element name="WCBNSEarningsReportForm"        type="EarningsReportForm" />
      </xs:choice>
    </xs:complexType>
  </xs:element>

  <!-- Start of Injury Report Form-->
  <xs:complexType name="InjuryReportForm" >
    <xs:sequence>
      <xs:element name="WorkerInfo"           type="WorkerInformation" />
      <xs:element name="InjuryInfo"          type="InjuryInformation" />
      <xs:element name="JobInfo"              type="JobInformation" />
      <xs:element name="EarningsInfo"         type="EarningsInformation" minOccurs="0" />
      <xs:element name="Declaration"         type="IRDeclarationConsent" />
      <xs:element name="ReportProperty"      type="ReportProperty" />
    </xs:sequence>
  </xs:complexType>
  <!-- End of injury Report Form-->

  <!-- Start of Earnings Report Form-->
  <xs:complexType name="EarningsReportForm" >
    <xs:sequence >
      <xs:element name="WorkerInfo"          type="WorkerInformation" />
```

```

    <xs:element name="EarningsInfo"                type="EarningsInformation" minOccurs="1" />
    <xs:element name="Declaration"                type="ERDeclaration" />
    <xs:element name="ReportProperty"            type="ReportProperty" />
  </xs:sequence>
</xs:complexType>
<!-- End of Earnings Report Form-->

<!-- Start of Complex Types-->
<xs:complexType name="WorkerInformation">
  <xs:sequence>
    <xs:element name="FullName" type="FullNameType"/>
    <xs:element name="FieldedAddress" type="FieldedAddressType" />
    <xs:element name="Region"                type="RegionType"/>
    <xs:element name="HomePhone"            type="TelephoneType" minOccurs="0" />
    <xs:element name="WorkPhone"            type="TelephoneType" minOccurs="0" />
    <xs:element name="CellPhone"            type="TelephoneType" minOccurs="0" />
    <xs:element name="Occupation"            type="description50" minOccurs="0" />
    <xs:element name="HealthCard"            type="HealthNumberType" minOccurs="0" />
    <xs:element name="SIN"                    type="SINType" minOccurs="0" />
    <xs:element name="DateOfBirth"            type="DateType" />
    <xs:element name="Gender"                type="GenderType"/>
  </xs:sequence>
</xs:complexType>

<xs:complexType name="InjuryInformation">
  <xs:sequence>
    <xs:choice>
      <xs:element name="SpecificIncident">
        <xs:complexType >
          <xs:sequence>
            <xs:element name="SpecificIncidentIndicator"                type="YesNoType" minOccurs="1" />
            <xs:element name="SpecificIncidentDateTime"                type="xs:dateTime" minOccurs="1" />
          </xs:sequence>
        </xs:complexType>
      </xs:element>
      <xs:element name="OverTime">

```

```

<xs:complexType >
  <xs:sequence>
    <xs:element name="OverTimeIndicator" type="YesNoType" minOccurs="1" />
    <xs:element name="OverTimeDateSymptomsNoticed" type="DateType" minOccurs="1" />
  </xs:sequence>
</xs:complexType>
</xs:element>

</xs:choice>
<xs:element name="PartOfBody">
  <xs:complexType >
    <xs:sequence>
      <xs:element name="Description" type="bodydescription" minOccurs="1"/>
      <xs:element name="LeftSide" type="xs:boolean" minOccurs="0" />
      <xs:element name="RightSide" type="xs:boolean" minOccurs="0" />
      <xs:element name="UpperBody" type="xs:boolean" minOccurs="0" />
      <xs:element name="LowerBody" type="xs:boolean" minOccurs="0" />
    </xs:sequence>
  </xs:complexType>
</xs:element>
<xs:element name="HappenedHow" type="accidentdescription"/>
<xs:element name="InjuryLocation">
  <xs:complexType>
    <xs:complexContent>
      <xs:extension base="RegionILType">
        <xs:sequence>
          <xs:element name="OccurrenceCounty" type="CountyType" minOccurs="0" />
        </xs:sequence>
      </xs:extension>
    </xs:complexContent>
  </xs:complexType >
</xs:element>
<xs:element name="PersonFactorDescription" type="description100" minOccurs="0" />
<xs:element name="MedicalAttention">
  <xs:complexType >
    <xs:sequence>

```

```

    <xs:element name="MedicalAttentionSought"
    <xs:element name="MedicalAttentionSoughtDate"
    <xs:element name="NameOfDoctorOrFacility"
    <xs:element name="LocationOfDoctorOrFacility"
    <xs:element name="TelephoneOfDoctorOrFacility"
  </xs:sequence>
</xs:complexType>
</xs:element >
<xs:element name="LostTime">
  <xs:complexType >
    <xs:sequence>
      <xs:element name="WorkerLostTimeIndicator"
      <xs:element name="DateTimeLostTimeStarted"
    </xs:sequence>
  </xs:complexType>
</xs:element >
<xs:element name="LostEarnings">
  <xs:complexType >
    <xs:sequence>
      <xs:element name="WorkerLostEarningsIndicator"
      <xs:element name="DateTimeLostEarningsStarted"
    </xs:sequence>
  </xs:complexType>
</xs:element >
<xs:element name="WorkerType"
<xs:element name="WorkerLivesWithOfficer"
<xs:element name="ReportedTo">
  <xs:complexType>
    <xs:sequence>
      <xs:element name="DateReported"
      <xs:element name="Name"
      <xs:element name="Title"
      <xs:element name="Telephone"
      <xs:element name="DelayInReportingDescription"
    </xs:sequence>
  </xs:complexType>

```

```

type="YesNoType" />
  type="DateType" minOccurs="0" />
type="name45" minOccurs="0" />
type="text35" minOccurs="0" />
type="TelephoneType" minOccurs="0" />

```

```

type="YesNoType" />
type="xs:dateTime" minOccurs="0" />

```

```

type="YesNoType" />
type="xs:dateTime" minOccurs="0" />

```

```

type="WorkerType" minOccurs="0"/>
type="YesNoType" minOccurs="0" />

```

```

type="DateType"/>
type="name45" minOccurs="0" />
type="text25" minOccurs="0" />
type="TelephoneType" minOccurs="0" />
type="description100" minOccurs="0" />

```



```

</xs:element>
</xs:sequence>
</xs:complexType>

<xs:complexType name="JobInformation">
  <xs:sequence>
    <xs:element name="MainJobDescription" type="jobdescription" minOccurs="0" />
    <xs:element name="DominantHand" type="DominantHand" minOccurs="0"/>
    <xs:element name="TimeEmployedCurrentPosition" type="text20" minOccurs="0" />
    <xs:element name="PreviousPositionDescription" type="description35" minOccurs="0" />
    <xs:element name="AmountOfOvertime" type="text20" minOccurs="0" />
    <xs:element name="ResponsibilityChangeDescription" type="description100" minOccurs="0" />
  </xs:sequence>
</xs:complexType>

<xs:complexType name="EarningsInformation">
  <xs:sequence>
    <xs:element name="TwelveMonthsPrior" type="YesNoType"/>
    <xs:element name="EmploymentOccupation">
      <xs:complexType >
        <xs:sequence>
          <xs:element name="EmploymentType" type="EmploymentType"/>
          <xs:element name="SubContractor" type="xs:boolean" minOccurs="0" />
          <xs:element name="VehicleOperator" type="xs:boolean" minOccurs="0" />
          <xs:element name="CourierService" type="xs:boolean" minOccurs="0" />
          <xs:element name="OccupationLogging" type="xs:boolean" minOccurs="0" />
          <xs:element name="SelfEmployed" type="xs:boolean" minOccurs="0" />
          <xs:element name="Other" type="xs:boolean" minOccurs="0" />
          <xs:element name="OtherDescription" type="description25" minOccurs="0" />
        </xs:sequence>
      </xs:complexType>
    </xs:element >
    <xs:element name="OriginalEmploymentStartDate" type="DateType" minOccurs="0" />

    <xs:element name="NormalGrossEarnings">
      <xs:complexType >

```

```

<xs:sequence>
  <xs:element name="Amount" type="xs:decimal" minOccurs="0"/>
  <xs:element name="TimePeriod" type="EarningsTimePeriod" minOccurs="0" />
  <xs:element name="OtherDescription" type="description50" minOccurs="0"/>
  <xs:element name="OneYearOrLess" type="xs:decimal" minOccurs="0"/>
  <xs:element name="OneYearOrLessStartDate" type="DateType" minOccurs="0"/>
  <xs:element name="OneYearOrLessEndDate" type="DateType" minOccurs="0" />
</xs:sequence>
</xs:complexType>
</xs:element >
<xs:element name="UsualHoursDaysWorked">
  <xs:complexType >
    <xs:sequence>
      <xs:element name="HoursDaysWorked" type="hoursdays" />
      <xs:element name="WorkedTimeLength" type="TimeLength"/>
      <xs:element name="WorkedTimePeriod" type="WorkedTimePeriod" />
      <xs:element name="OtherDescription" type="description50" minOccurs="0"/>
      <xs:element name="UsualDaysWorked">
        <xs:complexType >
          <xs:sequence>
            <xs:element name="Sun" type="xs:boolean" minOccurs="0" />
            <xs:element name="Mon" type="xs:boolean" minOccurs="0" />
            <xs:element name="Tue" type="xs:boolean" minOccurs="0" />
            <xs:element name="Wed" type="xs:boolean" minOccurs="0" />
            <xs:element name="Thu" type="xs:boolean" minOccurs="0" />
            <xs:element name="Fri" type="xs:boolean" minOccurs="0" />
            <xs:element name="Sat" type="xs:boolean" minOccurs="0" />
          </xs:sequence>
        </xs:complexType>
      </xs:element >
    </xs:sequence>
  </xs:complexType>
</xs:element >
<xs:element name="TaxDeductionCode" type="TaxDeductionCode"/>
<xs:element name="NumberOfHoursScheduled" type="HourType"/>
<xs:element name="NumberOfHoursWorked" type="HourType"/>

```

```

<xs:element name="NumberOfHoursPaid" type="HourType"/>

<xs:element name="ReturnToWork">
  <xs:complexType >
    <xs:sequence>
      <xs:element name="ReturnToWorkIndicator" type="YesNoType"/>
      <xs:element name="ReturnToWorkDateTime" type="xs:dateTime" minOccurs="0" />
    </xs:sequence>
  </xs:complexType>
</xs:element >

<xs:element name="ReturnToRegularDuties">
  <xs:complexType >
    <xs:sequence>
      <xs:element name="ReturnToRegularDutiesIndicator" type="YesNoType"/>
      <xs:element name="ReturnToRegularDutiesDateTime" type="xs:dateTime" minOccurs="0" />
    </xs:sequence>
  </xs:complexType>
</xs:element >

<xs:element name="PaymentsAnticipated">
  <xs:complexType >
    <xs:sequence>
      <xs:element name="PaymentsAnticipatedIndicator" type="YesNoType"/>
      <xs:element name="TypeOfBenefitsPaid" type="text30" minOccurs="0"/>
      <xs:element name="LengthOfPayments" type="text30" minOccurs="0"/>
    </xs:sequence>
  </xs:complexType>
  <xs:element name="GeneralExplanation" type="explanation" minOccurs="0"/>
</xs:sequence>
</xs:complexType>

<xs:complexType name="IRDeclarationConsent">
  <xs:sequence>
    <!-- Added Phone, better control of consent etc, please validate ? -->

```

```

<xs:element name="EmployerDeclare"
<xs:element name="EmployerDeclareName"
<xs:element name="EmployerDeclareDate"
<xs:element name="Telephone"
<xs:element name="WorkerDeclare"
<xs:element name="WorkerDeclareName"
<xs:element name="WorkerDeclareDate"
<xs:element name="WorkerConsent"
<xs:element name="CopyToWorker"
</xs:sequence>
</xs:complexType>
<xs:complexType name="ERDeclaration">
<xs:sequence>
<xs:element name="EarningsConfirmName"
<xs:element name="EarningsConfirmDate"
</xs:sequence>
</xs:complexType>

<xs:simpleType name="ReportProperty">
<xs:restriction base="xs:string">
<!-- <xs:length value="21"/> -->
<xs:minLength value="18"/>
<xs:maxLength value="21"/>
<xs:enumeration value="WCBInjuryReportForm"/>
<xs:enumeration value="WorkerEarningsForm"/>
</xs:restriction>
</xs:simpleType>

<!-- START OF PARTICIPANT INFORMATION -->
<xs:complexType name="NameType">
<xs:sequence>
<xs:element name="FirstName">
<xs:simpleType>
<xs:restriction base="xs:string">
<xs:minLength value="1"/>
type="AgreeDisagree"/>
type="name50R" minOccurs="1"/>
type="DateType" minOccurs="0" />
type="TelephoneType" minOccurs="0" />
type="AgreeDisagree" minOccurs="0" />
type="name50" minOccurs="0"/>
type="DateType" minOccurs="0" />
type="xs:boolean" />
type="xs:boolean"/>

type="name50" minOccurs="1" />
type="DateType" minOccurs="1" />

```

```

        <xs:maxLength value="25"/>
    </xs:restriction>
</xs:simpleType>
</xs:element>
<xs:element name="LastName">
    <xs:simpleType>
        <xs:restriction base="xs:string">
            <xs:minLength value="1"/>
            <xs:maxLength value="20"/>
        </xs:restriction>
    </xs:simpleType>
</xs:element>
</xs:sequence>
</xs:complexType>
<xs:complexType name="FullNameType">
    <xs:complexContent>
        <xs:extension base="NameType">
            <xs:sequence>
                <xs:element name="MiddleInitial" minOccurs="0">
                    <xs:simpleType>
                        <xs:restriction base="xs:string">
                            <xs:minLength value="1"/>
                            <xs:maxLength value="1"/>
                        </xs:restriction>
                    </xs:simpleType>
                </xs:element>
            </xs:sequence>
        </xs:extension>
    </xs:complexContent>
</xs:complexType>

<xs:simpleType name="SINType">
    <xs:restriction base="xs:string">
        <xs:pattern value="\d{3}([- ]?)\d{3}([- ]?)\d{3}"/> <!-- or <xs:pattern value="\d{9}"/> -->
    </xs:restriction>
</xs:simpleType>

```

```

<xs:simpleType name="HealthNumberType">
  <xs:restriction base="xs:string">
    <xs:pattern value="\d{4}([- ]?)\d{3}([- ]?)\d{3}"/>
  </xs:restriction>
</xs:simpleType>

```

```

<xs:simpleType name="email">
  <xs:restriction base="xs:string">
    <xs:pattern value="^([0-9a-zA-Z][-\.\w]*[0-9a-zA-Z])* @([0-9a-zA-Z][-\w]*[0-9a-zA-Z]\.)+[a-zA-Z]{2,9}$"/>
  </xs:restriction>
</xs:simpleType>

```

```

<!-- Telephone Number Types -->
<xs:complexType name="TelephoneType">
  <xs:sequence>
    <xs:element name="AreaCode">
      <xs:simpleType>
        <xs:restriction base="xs:string">
          <xs:pattern value="\d{3}"/>
        </xs:restriction>
      </xs:simpleType>
    </xs:element>
    <xs:element name="Number">
      <xs:simpleType>
        <xs:restriction base="xs:string">
          <xs:pattern value="\d{7}"/>
        </xs:restriction>
      </xs:simpleType>
    </xs:element>
    <xs:element name="NumberExt" minOccurs="0">
      <xs:simpleType>
        <xs:restriction base="xs:string">
          <xs:minLength value="1"/>
          <xs:maxLength value="4"/>
          <xs:pattern value="[a-zA-Z0-9]*"/>
        </xs:restriction>
      </xs:simpleType>
    </xs:element>
  </xs:sequence>
</xs:complexType>

```

```

    </xs:restriction>
  </xs:simpleType>
</xs:element>
</xs:sequence>
</xs:complexType>

<xs:simpleType name="HourType">
  <xs:restriction base="xs:decimal">
    <xs:minInclusive value="0"/>
    <xs:maxInclusive value="24"/>
    <xs:fractionDigits value="2"/>
  </xs:restriction>
</xs:simpleType>

<xs:simpleType name="hoursdays">
  <xs:restriction base="xs:string">
    <xs:pattern value="[0-9]{1,4}\.[0-9]{2}"/> <!-- /^[0-9]{1,4}\.[0-9]{2}$/ -->
  </xs:restriction>
</xs:simpleType>
<xs:simpleType name="TimeLength">
  <xs:restriction base="xs:string">
    <xs:maxLength value="5"/>
    <xs:enumeration value="HOURS"/>
    <xs:enumeration value="DAYS"/>
  </xs:restriction>
</xs:simpleType>

<xs:simpleType name="DateType">
  <xs:restriction base="xs:date">
    <xs:minInclusive value="1900-01-01"/>
  </xs:restriction>
</xs:simpleType>

<!-- Address and Region Types -->
<xs:complexType name="FieldedAddressType">
  <xs:sequence>

```

```

<xs:element name="StreetNumber" type="StreetNumberType"/>
<xs:element name="StreetName" type="StreetNameType"/>
<xs:element name="UnitNumber" type="UnitNumberType" minOccurs="0"/>
<xs:element name="BoxNumber" type="BoxNumberType" minOccurs="0"/>
<xs:element name="RuralRouteNumber" type="RuralRouteNumberType" minOccurs="0"/>
</xs:sequence>
</xs:complexType>

```

```

<xs:complexType name="FieldedAddressOptionalType">
  <xs:sequence>
    <xs:element name="StreetNumber" type="StreetNumberType" minOccurs="0"/>
    <xs:element name="StreetName" type="StreetNameType" minOccurs="0"/>
    <xs:element name="UnitNumber" type="UnitNumberType" minOccurs="0"/>
    <xs:element name="BoxNumber" type="BoxNumberType" minOccurs="0"/>
    <xs:element name="RuralRouteNumber" type="RuralRouteNumberType" minOccurs="0"/>
  </xs:sequence>
</xs:complexType>
<xs:simpleType name="AddressLineType">
  <xs:restriction base="xs:string">
    <xs:minLength value="1"/>
    <xs:maxLength value="25"/>
  </xs:restriction>
</xs:simpleType>

```

```

<xs:complexType name="RegionType">
  <xs:sequence>
    <xs:element name="CityName" type="CityNameType"/>
    <xs:element name="Province" type="ProvinceStateType"/>
    <xs:element name="CountryTypeCode" type="CountryTypeCodeType" />
    <xs:element name="PostalCode" type="PostalCodeType" />
  </xs:sequence>
</xs:complexType>

```

```

<xs:complexType name="RegionILType">
  <xs:sequence>
    <xs:element name="CityName" type="CityNameType" minOccurs="0"/>

```



```

    <xs:element name="Province" type="ProvinceType" /> <!-- Includes AtSea and OutOfCountry-->
    <xs:element name="CountryTypeCode" type="CountryTypeCodeType" minOccurs="0"/>
    <xs:element name="PostalCode" type="PostalCodeType" minOccurs="0"/>
  </xs:sequence>
</xs:complexType>

```

```

<xs:complexType name="RegionOptionalType">
  <xs:sequence>
    <xs:element name="CityName" type="CityNameType" minOccurs="0"/>
    <xs:element name="Province" type="ProvinceStateType" minOccurs="0"/>
    <xs:element name="CountryTypeCode" type="CountryTypeCodeType" minOccurs="0"/>
    <xs:element name="PostalCode" type="PostalCodeType" minOccurs="0"/>
  </xs:sequence>
</xs:complexType>

```

```

<xs:simpleType name="StreetNumberType">
  <xs:restriction base="xs:string">
    <xs:minLength value="1"/>
    <xs:maxLength value="7"/>
  </xs:restriction>
</xs:simpleType>
<xs:simpleType name="StreetNameType">
  <xs:restriction base="xs:string">
    <xs:minLength value="1"/>
    <xs:maxLength value="30"/>
  </xs:restriction>
</xs:simpleType>
<xs:simpleType name="UnitNumberType">
  <xs:restriction base="xs:string">
    <xs:minLength value="1"/>
    <xs:maxLength value="6"/>
  </xs:restriction>
</xs:simpleType>
<xs:simpleType name="BoxNumberType">
  <xs:restriction base="xs:string">

```

```

    <xs:minLength value="1"/>
    <xs:maxLength value="5"/>
  </xs:restriction>
</xs:simpleType>
<xs:simpleType name="RuralRouteNumberType">
  <xs:restriction base="xs:string">
    <xs:minLength value="1"/>
    <xs:maxLength value="4"/>
  </xs:restriction>
</xs:simpleType>
<xs:simpleType name="CityNameType">
  <xs:restriction base="xs:string">
    <xs:minLength value="1"/>
    <xs:maxLength value="25"/>
  </xs:restriction>
</xs:simpleType>

<xs:simpleType name="CountryTypeCodeType">
  <xs:restriction base="xs:string">
    <xs:pattern value="[A-Z]{3}"/>
  </xs:restriction>
</xs:simpleType>

<xs:simpleType name="PostalCodeType">
  <xs:restriction base="xs:string">
    <!-- <xs:pattern value="(\d{5}(-\d{4})?$(^[ABCEGHJKLMNPRSTVXY]{1}\d{1}[A-Z]{1} *\d{1}[A-Z]{1}\d{1}$)"/> -->
    <!-- <xs:pattern value="(\^[ABCEGHJKLMNPRSTVXY]{1}[0-9]{1}[A-Z]{1}\s[0-9]{1}[A-Z]{1}[0-9]{1}$)(\^[ABCEGHJKLMNPRSTVXY]{1}[0-9]{1}[A-Z]{1}[0-9]{1}[A-Z]{1}[0-9]{1}$)"/> -->
    <xs:minLength value="6"/>
    <xs:maxLength value="7"/>
  </xs:restriction>
</xs:simpleType>
<xs:simpleType name="CountyType">
  <xs:restriction base="xs:string">
    <xs:minLength value="12"/>

```

```

<xs:maxLength value="18"/>
<xs:enumeration value="ANNAPOLIS COUNTY"/>
<xs:enumeration value="ANTIGONISH COUNTY"/>
<xs:enumeration value="CAPE BRETON COUNTY"/>
<xs:enumeration value="COLCHESTER COUNTY"/>
<xs:enumeration value="CUMBERLAND COUNTY"/>
<xs:enumeration value="DIGBY COUNTY"/>
<xs:enumeration value="GUYSBOROUGH COUNTY"/>
<xs:enumeration value="HALIFAX COUNTY"/>
<xs:enumeration value="HANTS COUNTY"/>
<xs:enumeration value="INVERNESS COUNTY"/>
<xs:enumeration value="KINGS COUNTY"/>
<xs:enumeration value="LUNENBURG COUNTY"/>
<xs:enumeration value="PICTOU COUNTY"/>
<xs:enumeration value="QUEENS COUNTY"/>
<xs:enumeration value="RICHMOND COUNTY"/>
<xs:enumeration value="SHELBURNE COUNTY"/>
<xs:enumeration value="VICTORIA COUNTY"/>
<xs:enumeration value="YARMOUTH COUNTY"/>
</xs:restriction>
</xs:simpleType>
<xs:simpleType name="ProvinceStateType">
  <xs:restriction base="xs:string">
    <xs:minLength value="2"/>
    <xs:maxLength value="2"/>
    <xs:enumeration value="AB"/>
    <xs:enumeration value="AK"/>
    <xs:enumeration value="AL"/>
    <xs:enumeration value="AR"/>
    <xs:enumeration value="AZ"/>
    <xs:enumeration value="BC"/>
    <xs:enumeration value="CA"/>
    <xs:enumeration value="CO"/>
    <xs:enumeration value="CT"/>
    <xs:enumeration value="DC"/>
    <xs:enumeration value="DE"/>
  </xs:restriction>
</xs:simpleType>

```

```
<xs:enumeration value="FL"/>
<xs:enumeration value="GA"/>
<xs:enumeration value="HI"/>
<xs:enumeration value="IA"/>
<xs:enumeration value="ID"/>
<xs:enumeration value="IL"/>
<xs:enumeration value="IN"/>
<xs:enumeration value="KS"/>
<xs:enumeration value="KY"/>
<xs:enumeration value="LA"/>
<xs:enumeration value="MA"/>
<xs:enumeration value="MB"/>
<xs:enumeration value="MD"/>
<xs:enumeration value="ME"/>
<xs:enumeration value="MI"/>
<xs:enumeration value="MN"/>
<xs:enumeration value="MO"/>
<xs:enumeration value="MS"/>
<xs:enumeration value="MT"/>
<xs:enumeration value="NB"/>
<xs:enumeration value="NC"/>
<xs:enumeration value="ND"/>
<xs:enumeration value="NE"/>
<xs:enumeration value="NH"/>
<xs:enumeration value="NJ"/>
<xs:enumeration value="NL"/>
<xs:enumeration value="NM"/>
<xs:enumeration value="NS"/>
<xs:enumeration value="NT"/>
<xs:enumeration value="NU"/>
<xs:enumeration value="NV"/>
<xs:enumeration value="NY"/>
<xs:enumeration value="OH"/>
<xs:enumeration value="OK"/>
<xs:enumeration value="ON"/>
<xs:enumeration value="OR"/>
```

```

<xs:enumeration value="PA"/>
<xs:enumeration value="PE"/>
<xs:enumeration value="QC"/>
<xs:enumeration value="RI"/>
<xs:enumeration value="SC"/>
<xs:enumeration value="SD"/>
<xs:enumeration value="SK"/>
<xs:enumeration value="TN"/>
<xs:enumeration value="TX"/>
<xs:enumeration value="UT"/>
<xs:enumeration value="VA"/>
<xs:enumeration value="VT"/>
<xs:enumeration value="WA"/>
<xs:enumeration value="WI"/>
<xs:enumeration value="WV"/>
<xs:enumeration value="WY"/>
<xs:enumeration value="YT"/>
</xs:restriction>
</xs:simpleType>
<xs:simpleType name="ProvinceType">
  <xs:restriction base="xs:string">
    <xs:minLength value="2"/>
    <xs:maxLength value="12"/>
    <xs:enumeration value="OUTOFCOUNTRY"/>
    <xs:enumeration value="ATSEA"/>
    <xs:enumeration value="AB"/>
    <xs:enumeration value="BC"/>
    <xs:enumeration value="MB"/>
    <xs:enumeration value="NB"/>
    <xs:enumeration value="NL"/>
    <xs:enumeration value="NT"/>
    <xs:enumeration value="NS"/>
    <xs:enumeration value="NU"/>
    <xs:enumeration value="ON"/>
    <xs:enumeration value="PE"/>
    <xs:enumeration value="QC"/>
  </xs:restriction>
</xs:simpleType>

```

```
<xs:enumeration value="SK"/>
<xs:enumeration value="YT"/>
</xs:restriction>
</xs:simpleType>
```

```
<!-- Other Types -->
<xs:simpleType name="YesNoType">
  <xs:restriction base="xs:string">
    <xs:enumeration value="Y"/>
    <xs:enumeration value="N"/>
  </xs:restriction>
</xs:simpleType>
```

```
<xs:simpleType name="GenderType">
  <xs:restriction base="xs:string">
    <xs:length value="1"/>
    <xs:enumeration value="F"/>
    <xs:enumeration value="M"/>
  </xs:restriction>
</xs:simpleType>
<xs:simpleType name="AgreeDisagree">
  <xs:restriction base="xs:string">
    <!-- <xs:length value="8"/> -->
    <xs:minLength value="5"/>
    <xs:maxLength value="8"/>
    <xs:enumeration value="Agree"/>
    <xs:enumeration value="Disagree"/>
  </xs:restriction>
</xs:simpleType>
<xs:simpleType name="WorkerType">
  <xs:restriction base="xs:string">
    <xs:maxLength value="17"/>
    <xs:enumeration value="PROPRIETOR"/>
    <xs:enumeration value="PARTNER"/>
```

```

    <xs:enumeration value="OFFICERORDIRECTOR"/>
    <xs:enumeration value="NONE"/>
  </xs:restriction>
</xs:simpleType>
<xs:simpleType name="DominantHand">
  <xs:restriction base="xs:string">
    <xs:maxLength value="5"/>
    <xs:enumeration value="RIGHT"/>
    <xs:enumeration value="LEFT"/>
  </xs:restriction>
</xs:simpleType>
<xs:simpleType name="EmploymentType" >
  <xs:restriction base="xs:string">
    <xs:maxLength value="9"/>
    <xs:enumeration value="PERMANENT"/>
    <xs:enumeration value="CASUAL"/>
    <xs:enumeration value="SEASONAL"/>
  </xs:restriction>
</xs:simpleType>
<xs:simpleType name="EarningsTimePeriod">
  <xs:restriction base="xs:string">
    <xs:maxLength value="8"/>
    <xs:enumeration value="PERHOUR"/>
    <xs:enumeration value="PERDAY"/>
    <xs:enumeration value="PERWEEK"/>
    <xs:enumeration value="BIWEEKLY"/>
    <xs:enumeration value="PERMONTH"/>
    <xs:enumeration value="OTHER"/>
  </xs:restriction>
</xs:simpleType>
<xs:simpleType name="WorkedTimePeriod">
  <xs:restriction base="xs:string">
    <xs:maxLength value="7"/>
    <xs:enumeration value="PERDAY"/>
    <xs:enumeration value="PERWEEK"/>
    <xs:enumeration value="OTHER"/>
  </xs:restriction>

```

```
</xs:restriction>
</xs:simpleType>
<xs:simpleType name="TaxDeductionCode">
  <xs:restriction base="xs:string">
    <xs:maxLength value="10"/>
  </xs:restriction>
</xs:simpleType>
```

```
<!-- Start of Description type Fields -->
<!-- Is there a better way of doing these?? -->
<xs:simpleType name="jobdescription">
  <xs:restriction base="xs:string">
    <xs:minLength value="20"/>
    <xs:maxLength value="250"/>
  </xs:restriction>
</xs:simpleType>
<xs:simpleType name="bodydescription">
  <xs:restriction base="xs:string">
    <xs:maxLength value="86"/>
  </xs:restriction>
</xs:simpleType>
<xs:simpleType name="accidentdescription">
  <xs:restriction base="xs:string">
    <xs:minLength value="20"/>
    <xs:maxLength value="400"/>
  </xs:restriction>
</xs:simpleType>
<xs:simpleType name="explanation">
  <xs:restriction base="xs:string">
    <xs:maxLength value="800"/>
  </xs:restriction>
</xs:simpleType>
```

```
<xs:simpleType name="text20">
  <xs:restriction base="xs:string">
    <xs:maxLength value="20"/>
```



```
</xs:restriction>
</xs:simpleType>
<xs:simpleType name="text25">
  <xs:restriction base="xs:string">
    <xs:maxLength value="25"/>
  </xs:restriction>
</xs:simpleType>
<xs:simpleType name="text30">
  <xs:restriction base="xs:string">
    <xs:maxLength value="30"/>
  </xs:restriction>
</xs:simpleType>
<xs:simpleType name="text35">
  <xs:restriction base="xs:string">
    <xs:maxLength value="35"/>
  </xs:restriction>
</xs:simpleType>
<xs:simpleType name="name50">
  <xs:restriction base="xs:string">
    <xs:maxLength value="50"/>
  </xs:restriction>
</xs:simpleType>
<xs:simpleType name="name50R">
  <xs:restriction base="xs:string">
    <xs:minLength value="1"/>
    <xs:maxLength value="50"/>
  </xs:restriction>
</xs:simpleType>
<xs:simpleType name="name45">
  <xs:restriction base="xs:string">
    <xs:maxLength value="45"/>
  </xs:restriction>
</xs:simpleType>
<xs:simpleType name="description25">
  <xs:restriction base="xs:string">
    <xs:maxLength value="25"/>
  </xs:restriction>
</xs:simpleType>
```

```

</xs:restriction>
</xs:simpleType>
<xs:simpleType name="description30">
  <xs:restriction base="xs:string">
    <xs:maxLength value="30"/>
  </xs:restriction>
</xs:simpleType>
<xs:simpleType name="description35">
  <xs:restriction base="xs:string">
    <xs:maxLength value="35"/>
  </xs:restriction>
</xs:simpleType>
<xs:simpleType name="description50">
  <xs:restriction base="xs:string">
    <xs:maxLength value="50"/>
  </xs:restriction>
</xs:simpleType>
<xs:simpleType name="description100">
  <xs:restriction base="xs:string">
    <xs:maxLength value="100"/>
  </xs:restriction>
</xs:simpleType>
<xs:simpleType name="BN">
  <xs:restriction base="xs:string">
    <xs:minLength value="15"/>
    <xs:maxLength value="15"/>
  </xs:restriction>
</xs:simpleType>
</xs:schema>

```

### ***ReportResponse\_v10.xsd***

```

<?xml version="1.0" encoding="UTF-8"?>
<xs:schema targetNamespace="http://b2b.worksafens.ca/ISSv1/ReportResponse"
  xmlns:xs="http://www.w3.org/2001/XMLSchema"
  xmlns="http://b2b.worksafens.ca/ISSv1/ReportResponse">

```

```

<xs:element name="ReportResponse" type="ReportResponseType"/>

<xs:complexType name="ReportResponseType">
  <xs:choice>
    <xs:element name="Acknowledgement" type="AcknowledgementType"/>
    <xs:element name="ErrorNotification" type="ErrorNotificationType"/>
  </xs:choice>
</xs:complexType>
<xs:complexType name="AcknowledgementType">
  <xs:sequence>
    <xs:element name="TransactionDateTime" type="xs:dateTime"/>
    <xs:element name="TransactionIdentifier" type="UUID" />
  </xs:sequence>
</xs:complexType>
<xs:complexType name="ErrorNotificationType">
  <xs:sequence>
    <xs:element name="TransactionDateTime" type="xs:dateTime"/>
    <xs:element name="TransactionIdentifier" type="UUID" />
    <xs:element name="Error" type="ErrorType" maxOccurs="unbounded"/>
  </xs:sequence>
</xs:complexType>
<xs:complexType name="ErrorType">
  <xs:sequence>
    <xs:element name="ErrorCode" type="xs:string"/>
    <xs:element name="ErrorDescription" type="xs:string"/>
    <xs:element name="ErrorNode" type="ErrorNodeType" minOccurs="0"/>
  </xs:sequence>
</xs:complexType>
<xs:complexType name="ErrorNodeType">
  <xs:sequence>
    <xs:element name="NodeName" type="xs:string"/>
    <xs:element name="NodeValue" type="xs:string"/>
    <xs:element name="NodePath" type="xs:string" minOccurs="0"/>
  </xs:sequence>
</xs:complexType>
<xs:simpleType name="UUID">

```

```

<xs:restriction base="xs:string">
  <xs:length value="36" fixed="true" />
  <xs:pattern value="[0-9a-fA-F]{8}-[0-9a-fA-F]{4}-[0-9a-fA-F]{4}-[0-9a-fA-F]{4}-[0-9a-fA-F]{12}" />
</xs:restriction>
</xs:simpleType>
</xs:schema>

```

## Connectivity Test Schema

```

<?xml version="1.0" encoding="UTF-8"?>
<xsd:schema targetNamespace="http://b2b.worksafens.ca/ISSv1/wcb.ConnectivityTest"
  xmlns:xsd="http://www.w3.org/2001/XMLSchema"
  xmlns="http://b2b.worksafens.ca/ISSv1/wcb.ConnectivityTest">
  <xsd:complexType name="ConnectivityTestRequestType">
    <xsd:sequence>
      <xsd:element name="PartnerMessage">
        <xsd:annotation>
          <xsd:documentation>Message sent by the partner to the WCB.</xsd:documentation>
        </xsd:annotation>
        <xsd:simpleType>
          <xsd:restriction base="xsd:string">
            <xsd:maxLength value="50"/>
          </xsd:restriction>
        </xsd:simpleType>
      </xsd:element>
      <xsd:element name="RequestedResponse" type="RequestedResponseType">
        </xsd:element>
    </xsd:sequence>
    <xsd:attribute name="BusinessPartnerRoleID" use="required">
      <xsd:annotation>
        <xsd:documentation>Unique id identifying the partner to the WCB.</xsd:documentation>
      </xsd:annotation>
      <xsd:simpleType>
        <xsd:restriction base="xsd:string">
          <xsd:maxLength value="10"/>
          <xsd:minLength value="1"/>
        </xsd:restriction>
      </xsd:simpleType>
    </xsd:attribute>
    <xsd:attribute name="BusinessPartnerRoleType" use="required">
      <xsd:annotation>

```

```

    <xsd:documentation>Defines the type of partner.</xsd:documentation>
  </xsd:annotation>
  <xsd:simpleType>
    <xsd:restriction base="xsd:string">
      <xsd:minLength value="1"/>
      <xsd:maxLength value="4"/>
    </xsd:restriction>
  </xsd:simpleType>
</xsd:attribute>
</xsd:complexType>
<xsd:complexType name="ConnectivityTestResponseType">
  <xsd:annotation>
    <xsd:documentation>Controls the type of response sent back by the Web Service. This can be an
  acknowledgement message, and error notification message, or a SOAP Fault.</xsd:documentation>
  </xsd:annotation>
  <xsd:choice>
    <xsd:element name="Acknowledgement" type="AcknowledgementType"/>
    <xsd:element name="ErrorNotification" type="ErrorNotificationType"/>
  </xsd:choice>
</xsd:complexType>
<xsd:simpleType name="RequestedResponseType">
  <xsd:restriction base="xsd:string">
    <xsd:enumeration value="Acknowledgement"/>
    <xsd:enumeration value="ErrorNotification"/>
    <xsd:enumeration value="SoapFault"/>
  </xsd:restriction>
</xsd:simpleType>
<xsd:complexType name="AcknowledgementType">
  <xsd:sequence>
    <xsd:element name="TransactionDateTime" type="xsd:dateTime"/>
    <xsd:element name="CorrelationID" type="xsd:string"/>
  </xsd:sequence>
</xsd:complexType>
<xsd:complexType name="ErrorNotificationType">
  <xsd:sequence>
    <xsd:element name="TransactionDateTime" type="xsd:dateTime"/>
    <xsd:element name="CorrelationID" type="xsd:string" minOccurs="0"/>
    <xsd:element name="ErrorDetails" type="ErrorType"/>
  </xsd:sequence>
</xsd:complexType>
<xsd:complexType name="ErrorType">
  <xsd:sequence>
    <xsd:element name="ErrorItem" type="ErrorItemType" maxOccurs="unbounded"/>

```

```

    </xsd:sequence>
  </xsd:complexType>
  <xsd:complexType name="ErrorItemType">
    <xsd:sequence>
      <xsd:element name="ErrorCode" type="xsd:int"/>
      <xsd:element name="ErrorDescription" type="xsd:string"/>
      <xsd:element name="ErrorNode" type="ErrorNodeType" minOccurs="0"/>
    </xsd:sequence>
  </xsd:complexType>
  <xsd:complexType name="ErrorNodeType">
    <xsd:sequence>
      <xsd:element name="NodePath" type="xsd:string"/>
      <xsd:element name="NodeName" type="xsd:string"/>
      <xsd:element name="NodeValue" type="xsd:string"/>
    </xsd:sequence>
  </xsd:complexType>
  <xsd:element name="ConnectivityTestRequest" type="ConnectivityTestRequestType"/>
  <xsd:element name="ConnectivityTestResponse" type="ConnectivityTestResponseType"/>
</xsd:schema>

```

## Appendix D. – Sample Submission and Response Messages

### *Sample Injury Report Submission Message*

This section contains sample successful and unsuccessful Injury Reports for an injured worker. The Business Partner's Web Service client should be able to successfully generate and submit similar reports as well as receive and process any arising errors.

**Figure 10 – Sample Successful Injury Report Submission**

```
<?xml version="1.0" encoding="utf-8"?>
<WCBReportForm>
  <WCBNSInjuryReportForm>
    <WorkerInfo>
      <FullName>
        <FirstName>FirstName1</FirstName>
        <LastName>LastName1</LastName>
        <MiddleInitial>1</MiddleInitial>
      </FullName>
      <FieldedAddress>
        <StreetNumber>Street1</StreetNumber>
        <StreetName>StreetName1</StreetName>
      </FieldedAddress>
      <Region>
        <CityName>CityName1</CityName>
        <Province>OUTOFCOUNTRY</Province>
        <CountryTypeCode>CountryTypeCode1</CountryTypeCode>
        <PostalCode>PostalCode1</PostalCode>
      </Region>
      <HomePhone>
        <AreaCode>AreaCode1</AreaCode>
        <Number>Number1</Number>
        <NumberExt>Numb1</NumberExt>
      </HomePhone>
      <WorkPhone>
        <AreaCode>AreaCode1</AreaCode>
        <Number>Number1</Number>
        <NumberExt>Numb1</NumberExt>
      </WorkPhone>
      <CellPhone>
        <AreaCode>AreaCode1</AreaCode>
        <Number>Number1</Number>
        <NumberExt>Numb1</NumberExt>
      </CellPhone>
      <Occupation>Occupation1</Occupation>
      <HealthCard>HealthCard1</HealthCard>
      <SIN>SIN1</SIN>
      <DateOfBirth>1900-01-01</DateOfBirth>
      <Gender>F</Gender>
    </WorkerInfo>
    <InjuryInfo>
      <SpecificIncident>
```

```

<SpecificIncidentIndicator>Y</SpecificIncidentIndicator>
<SpecificIncidentDateTime>1900-01-01T01:01:01-05:00</SpecificIncidentDateTime>
</SpecificIncident>
<PartOfBody>
<Description>Description1</Description>
<LeftSide>true</LeftSide>
<RightSide>true</RightSide>
<UpperBody>true</UpperBody>
<LowerBody>true</LowerBody>
</PartOfBody>
<HappenedHow>HappenedHow_____1</HappenedHow>
<InjuryLocation>
<CityName>CityName1</CityName>
<Province>OUTOFCOUNTRY</Province>
<CountryTypeCode>CountryTypeCode1</CountryTypeCode>
<PostalCode>PostalCode1</PostalCode>
<OccurrenceCounty>OccurrenceCountyDescription1</OccurrenceCounty>
</InjuryLocation>
<PersonFactorDescription>PersonFactorDescription1</PersonFactorDescription>
<MedicalAttention>
<MedicalAttentionSought>Y</MedicalAttentionSought>
<MedicalAttentionSoughtDate>1900-01-01</MedicalAttentionSoughtDate>
<NameOfDoctorOrFacility>NameOfDoctorOrFacility1</NameOfDoctorOrFacility>
<LocationOfDoctorOrFacility>
<StreetNumber>Street1</StreetNumber>
<StreetName>StreetName1</StreetName>
<UnitNumber>UnitN1</UnitNumber>
<BoxNumber>BoxN1</BoxNumber>
<RuralRouteNumber>Rur1</RuralRouteNumber>
</LocationOfDoctorOrFacility>
<TelephoneOfDoctorOrFacility>
<AreaCode>AreaCode1</AreaCode>
<Number>Number1</Number>
<NumberExt>Numb1</NumberExt>
</TelephoneOfDoctorOrFacility>
</MedicalAttention>
<LostTime>
<WorkerLostTimeIndicator>Y</WorkerLostTimeIndicator>
<DateTimeLostTimeStarted>1900-01-01T01:01:01-05:00</DateTimeLostTimeStarted>
</LostTime>
<LostEarnings>
<WorkerLostEarningsIndicator>Y</WorkerLostEarningsIndicator>
<DateTimeLostEarningsStarted>1900-01-01T01:01:01-05:00</DateTimeLostEarningsStarted>
</LostEarnings>
<WorkerType>PROPRIETOR</WorkerType>
<WorkerLivesWithOfficer>Y</WorkerLivesWithOfficer>
<ReportedTo>
<DateReported>1900-01-01</DateReported>
<Name>Name1</Name>
<Title>Title1</Title>
<Telephone>
<AreaCode>AreaCode1</AreaCode>
<Number>Number1</Number>
<NumberExt>Numb1</NumberExt>

```



```

</Telephone>
<DelayInReportingDescription>DelayInReportingDescription1</DelayInReportingDescription>
</ReportedTo>
</InjuryInfo>
<JobInfo>
<MainJobDescription>MainJobDescription_1</MainJobDescription>
<DominantHand>RIGHT</DominantHand>
<TimeEmployedCurrentPosition>TimeEmployedCurrent1</TimeEmployedCurrentPosition>
<PreviousPositionDescription>PreviousPositionDescription1</PreviousPositionDescription>
<AmountOfOvertime>AmountOfOvertime1</AmountOfOvertime>
<ResponsibilityChangeDescription>ResponsibilityChangeDescription1</ResponsibilityChangeDescription>
</JobInfo>
<EarningsInfo>
<TwelveMonthsPrior>Y</TwelveMonthsPrior>
<EmploymentOccupation>
<EmploymentType>PERMANENT</EmploymentType>
<SubContractor>true</SubContractor>
<VehicleOperator>true</VehicleOperator>
<CourierService>true</CourierService>
<OccupationLogging>true</OccupationLogging>
<SelfEmployed>true</SelfEmployed>
<Other>true</Other>
<OtherDescription>OtherDescription1</OtherDescription>
</EmploymentOccupation>
<OriginalEmploymentStartDate>1900-01-01</OriginalEmploymentStartDate>
<NormalGrossEarnings>
<Amount>1</Amount>
<TimePeriod>PERHOUR</TimePeriod>
<OtherDescription>OtherDescription1</OtherDescription>
<OneYearOrLess>1</OneYearOrLess>
<OneYearOrLessStartDate>1900-01-01</OneYearOrLessStartDate>
<OneYearOrLessEndDate>1900-01-01</OneYearOrLessEndDate>
</NormalGrossEarnings>
<UsualHoursDaysWorked>
<HoursDaysWorked>HoursDaysWorked1</HoursDaysWorked>
<WorkedTimeLength>HOURS</WorkedTimeLength>
<WorkedTimePeriod>PERDAY</WorkedTimePeriod>
<OtherDescription>OtherDescription1</OtherDescription>
<UsualDaysWorked>
<Sun>true</Sun>
<Mon>true</Mon>
<Tue>true</Tue>
<Wed>true</Wed>
<Thu>true</Thu>
<Fri>true</Fri>
<Sat>true</Sat>
</UsualDaysWorked>
</UsualHoursDaysWorked>
<TaxDeductionCode>TaxDeduct1</TaxDeductionCode>
<NumberOfHoursScheduled>0</NumberOfHoursScheduled>
<NumberOfHoursWorked>0</NumberOfHoursWorked>
<NumberOfHoursPaid>0</NumberOfHoursPaid>
<ReturnToWork>
<ReturnToWorkIndicator>Y</ReturnToWorkIndicator>

```

```

    <ReturnToWorkDateTime>1900-01-01T01:01:01-05:00</ReturnToWorkDateTime>
  </ReturnToWork>
  <ReturnToRegularDuties>
    <ReturnToRegularDutiesIndicator>Y</ReturnToRegularDutiesIndicator>
    <ReturnToRegularDutiesDateTime>1900-01-01T01:01:01-05:00</ReturnToRegularDutiesDateTime>
  </ReturnToRegularDuties>
  <PaymentsAnticipated>
    <PaymentsAnticipatedIndicator>Y</PaymentsAnticipatedIndicator>
    <TypeOfBenefitsPaid>TypeOfBenefitsPaid1</TypeOfBenefitsPaid>
    <LengthOfPayments>LengthOfPayments1</LengthOfPayments>
  </PaymentsAnticipated>
  <GeneralExplanation>GeneralExplanation1</GeneralExplanation>
</EarningsInfo>
<Declaration>
  <EmployerDeclare>Agree</EmployerDeclare>
  <EmployerDeclareName>EmployerDeclareName1</EmployerDeclareName>
  <EmployerDeclareDate>1900-01-01</EmployerDeclareDate>
  <Telephone>
    <AreaCode>AreaCode1</AreaCode>
    <Number>Number1</Number>
    <NumberExt>Numb1</NumberExt>
  </Telephone>
  <WorkerConsent>true</WorkerConsent>
  <CopyToWorker>true</CopyToWorker>
</Declaration>
  <ReportProperty>WCBInjuryReportForm</ReportProperty>
</WCBNSInjuryReportForm>
</WCBReportForm>

```

**Figure 11 - Sample Unsuccessful Injury Report Submission (Missing SIN and or HN Details)**

```

<?xml version="1.0" encoding="utf-8"?>
<WCBReportForm>
  <WCBNSInjuryReportForm>
    <WorkerInfo>
      <FullName>
        <FirstName>FirstName1</FirstName>
        <LastName>LastName1</LastName>
        <MiddleInitial>1</MiddleInitial>
      </FullName>
      <FieldedAddress>
        <StreetNumber>Street1</StreetNumber>
        <StreetName>StreetName1</StreetName>
      </FieldedAddress>
      <Region>
        <CityName>CityName1</CityName>
        <Province>OUTOFCOUNTRY</Province>
        <CountryTypeCode>CountryTypeCode1</CountryTypeCode>
        <PostalCode>PostalCode1</PostalCode>
      </Region>
      <HomePhone>
        <AreaCode>AreaCode1</AreaCode>
        <Number>Number1</Number>

```

```

    <NumberExt>Numb1</NumberExt>
  </HomePhone>
  <WorkPhone>
    <AreaCode>AreaCode1</AreaCode>
    <Number>Number1</Number>
    <NumberExt>Numb1</NumberExt>
  </WorkPhone>
  <CellPhone>
    <AreaCode>AreaCode1</AreaCode>
    <Number>Number1</Number>
    <NumberExt>Numb1</NumberExt>
  </CellPhone>
  <Occupation>Occupation1</Occupation>
  <HealthCard> </HealthCard>
  <SIN> </SIN>
  <DateOfBirth>1900-01-01</DateOfBirth>
  <Gender>F</Gender>
</WorkerInfo>
<InjuryInfo>
  <SpecificIncident>
    <SpecificIncidentIndicator>Y</SpecificIncidentIndicator>
    <SpecificIncidentDateTime>1900-01-01T01:01:01-05:00</SpecificIncidentDateTime>
  </SpecificIncident>
  <PartOfBody>
    <Description>Description1</Description>
    <LeftSide>true</LeftSide>
    <RightSide>true</RightSide>
    <UpperBody>true</UpperBody>
    <LowerBody>true</LowerBody>
  </PartOfBody>
  <HappenedHow>HappenedHow _____1</HappenedHow>
  <InjuryLocation>
    <CityName>CityName1</CityName>
    <Province>OUTOFCOUNTRY</Province>
    <CountryTypeCode>CountryTypeCode1</CountryTypeCode>
    <PostalCode>PostalCode1</PostalCode>
    <OccurrenceCounty>OccurrenceCounty</OccurrenceCounty>
  </InjuryLocation>
  <PersonFactorDescription>PersonFactorDescription1</PersonFactorDescription>
  <MedicalAttention>
    <MedicalAttentionSought>Y</MedicalAttentionSought>
    <MedicalAttentionSoughtDate>1900-01-01</MedicalAttentionSoughtDate>
    <NameOfDoctorOrFacility>NameOfDoctorOrFacility1</NameOfDoctorOrFacility>
  <LocationOfDoctorOrFacility>
    <StreetNumber>Street1</StreetNumber>
    <StreetName>StreetName1</StreetName>
    <UnitNumber>UnitN1</UnitNumber>
    <BoxNumber>BoxN1</BoxNumber>
    <RuralRouteNumber>Rur1</RuralRouteNumber>
  </LocationOfDoctorOrFacility>
  <TelephoneOfDoctorOrFacility>
    <AreaCode>AreaCode1</AreaCode>
    <Number>Number1</Number>
    <NumberExt>Numb1</NumberExt>

```

```

</TelephoneOfDoctorOrFacility>
</MedicalAttention>
<LostTime>
  <WorkerLostTimeIndicator>Y</WorkerLostTimeIndicator>
  <DateTimeLostTimeStarted>1900-01-01T01:01:01-05:00</DateTimeLostTimeStarted>
</LostTime>
<LostEarnings>
  <WorkerLostEarningsIndicator>Y</WorkerLostEarningsIndicator>
  <DateTimeLostEarningsStarted>1900-01-01T01:01:01-05:00</DateTimeLostEarningsStarted>
</LostEarnings>
<WorkerType>PROPRIETOR</WorkerType>
<WorkerLivesWithOfficer>Y</WorkerLivesWithOfficer>
<ReportedTo>
  <DateReported>1900-01-01</DateReported>
  <Name>Name1</Name>
  <Title>Title1</Title>
  <Telephone>
    <AreaCode>AreaCode1</AreaCode>
    <Number>Number1</Number>
    <NumberExt>Numb1</NumberExt>
  </Telephone>
  <DelayInReportingDescription>DelayInReportingDescription1</DelayInReportingDescription>
</ReportedTo>
</InjuryInfo>
<JobInfo>
  <MainJobDescription>MainJobDescription_1</MainJobDescription>
  <DominantHand>RIGHT</DominantHand>
  <TimeEmployedCurrentPosition>TimeEmployedCurrent1</TimeEmployedCurrentPosition>
  <PreviousPositionDescription>PreviousPositionDescription1</PreviousPositionDescription>
  <AmountOfOvertime>AmountOfOvertime1</AmountOfOvertime>
  <ResponsibilityChangeDescription>ResponsibilityChangeDescription1</ResponsibilityChangeDescription>
</JobInfo>
<EarningsInfo>
  <TwelveMonthsPrior>Y</TwelveMonthsPrior>
  <EmploymentOccupation>
    <EmploymentType>PERMANENT</EmploymentType>
    <SubContractor>true</SubContractor>
    <VehicleOperator>true</VehicleOperator>
    <CourierService>true</CourierService>
    <OccupationLogging>true</OccupationLogging>
    <SelfEmployed>true</SelfEmployed>
    <Other>true</Other>
    <OtherDescription>OtherDescription1</OtherDescription>
  </EmploymentOccupation>
  <OriginalEmploymentStartDate>1900-01-01</OriginalEmploymentStartDate>
  <NormalGrossEarnings>
    <Amount>1</Amount>
    <TimePeriod>PERHOUR</TimePeriod>
    <OtherDescription>OtherDescription1</OtherDescription>
    <OneYearOrLess>1</OneYearOrLess>
    <OneYearOrLessStartDate>1900-01-01</OneYearOrLessStartDate>
    <OneYearOrLessEndDate>1900-01-01</OneYearOrLessEndDate>
  </NormalGrossEarnings>
  <UsualHoursDaysWorked>

```

```

<HoursDaysWorked>HoursDaysWorked1</HoursDaysWorked>
<WorkedTimeLength>HOURS</WorkedTimeLength>
<WorkedTimePeriod>PERDAY</WorkedTimePeriod>
<OtherDescription>OtherDescription1</OtherDescription>
<UsualDaysWorked>
  <Sun>true</Sun>
  <Mon>true</Mon>
  <Tue>true</Tue>
  <Wed>true</Wed>
  <Thu>true</Thu>
  <Fri>true</Fri>
  <Sat>true</Sat>
</UsualDaysWorked>
</UsualHoursDaysWorked>
<TaxDeductionCode>TaxDeduct1</TaxDeductionCode>
<NumberOfHoursScheduled>0</NumberOfHoursScheduled>
<NumberOfHoursWorked>0</NumberOfHoursWorked>
<NumberOfHoursPaid>0</NumberOfHoursPaid>
<ReturnToWork>
  <ReturnToWorkIndicator>Y</ReturnToWorkIndicator>
  <ReturnToWorkDateTime>1900-01-01T01:01:01-05:00</ReturnToWorkDateTime>
</ReturnToWork>
<ReturnToRegularDuties>
  <ReturnToRegularDutiesIndicator>Y</ReturnToRegularDutiesIndicator>
  <ReturnToRegularDutiesDateTime>1900-01-01T01:01:01-05:00</ReturnToRegularDutiesDateTime>
</ReturnToRegularDuties>
<PaymentsAnticipated>
  <PaymentsAnticipatedIndicator>Y</PaymentsAnticipatedIndicator>
  <TypeOfBenefitsPaid>TypeOfBenefitsPaid1</TypeOfBenefitsPaid>
  <LengthOfPayments>LengthOfPayments1</LengthOfPayments>
</PaymentsAnticipated>
<GeneralExplanation>GeneralExplanation1</GeneralExplanation>
</EarningsInfo>
<Declaration>
  <EmployerDeclare>Agree</EmployerDeclare>
  <EmployerDeclareName>EmployerDeclareName1</EmployerDeclareName>
  <EmployerDeclareDate>1900-01-01</EmployerDeclareDate>
  <Telephone>
    <AreaCode>AreaCode1</AreaCode>
    <Number>Number1</Number>
    <NumberExt>Numb1</NumberExt>
  </Telephone>
  <WorkerConsent>true</WorkerConsent>
  <CopyToWorker>true</CopyToWorker>
</Declaration>
<ReportProperty>WCBInjuryReportForm</ReportProperty>
</WCBNSInjuryReportForm>
</WCBReportForm>

```

**Figure 12 - Sample Successful Earnings Report Submission**

```

<?xml version="1.0" encoding="utf-8"?>
<WCBReportForm>
  <WCBNSEarningsReportForm>

```

```

<WorkerInfo>
  <FullName>
    <FirstName>FirstName1</FirstName>
    <LastName>LastName1</LastName>
    <MiddleInitial>1</MiddleInitial>
  </FullName>
  <FieldedAddress>
    <StreetNumber>Street1</StreetNumber>
    <StreetName>StreetName1</StreetName>
  </FieldedAddress>
  <Region>
    <CityName>CityName1</CityName>
    <Province>OUTOFCOUNTRY</Province>
    <CountryTypeCode>CountryTypeCode1</CountryTypeCode>
    <PostalCode>PostalCode1</PostalCode>
  </Region>
  <HomePhone>
    <AreaCode>AreaCode1</AreaCode>
    <Number>Number1</Number>
    <NumberExt>Numb1</NumberExt>
  </HomePhone>
  <WorkPhone>
    <AreaCode>AreaCode1</AreaCode>
    <Number>Number1</Number>
    <NumberExt>Numb1</NumberExt>
  </WorkPhone>
  <CellPhone>
    <AreaCode>AreaCode1</AreaCode>
    <Number>Number1</Number>
    <NumberExt>Numb1</NumberExt>
  </CellPhone>
  <Occupation>Occupation1</Occupation>
  <HealthCard>HealthCard1</HealthCard>
  <SIN>SIN1</SIN>
  <DateOfBirth>1900-01-01</DateOfBirth>
  <Gender>F</Gender>
</WorkerInfo>
<EarningsInfo>
  <TwelveMonthsPrior>Y</TwelveMonthsPrior>
  <EmploymentOccupation>
    <EmploymentType>PERMANENT</EmploymentType>
    <SubContractor>true</SubContractor>
    <VehicleOperator>true</VehicleOperator>
    <CourierService>true</CourierService>
    <OccupationLogging>true</OccupationLogging>
    <SelfEmployed>true</SelfEmployed>
    <Other>true</Other>
    <OtherDescription>OtherDescription1</OtherDescription>
  </EmploymentOccupation>
  <OriginalEmploymentStartDate>1900-01-01</OriginalEmploymentStartDate>
  <NormalGrossEarnings>
    <Amount>1</Amount>
    <TimePeriod>PERHOUR</TimePeriod>
    <OtherDescription>OtherDescription1</OtherDescription>

```

```

<OneYearOrLess>1</OneYearOrLess>
<OneYearOrLessStartDate>1900-01-01</OneYearOrLessStartDate>
<OneYearOrLessEndDate>1900-01-01</OneYearOrLessEndDate>
</NormalGrossEarnings>
<UsualHoursDaysWorked>
  <HoursDaysWorked>HoursDaysWorked1</HoursDaysWorked>
  <WorkedTimeLength>HOURS</WorkedTimeLength>
  <WorkedTimePeriod>PERDAY</WorkedTimePeriod>
  <OtherDescription>OtherDescription1</OtherDescription>
  <UsualDaysWorked>
    <Sun>true</Sun>
    <Mon>true</Mon>
    <Tue>true</Tue>
    <Wed>true</Wed>
    <Thu>true</Thu>
    <Fri>true</Fri>
    <Sat>true</Sat>
  </UsualDaysWorked>
</UsualHoursDaysWorked>
<TaxDeductionCode>TaxDeduct1</TaxDeductionCode>
<NumberOfHoursScheduled>0</NumberOfHoursScheduled>
<NumberOfHoursWorked>0</NumberOfHoursWorked>
<NumberOfHoursPaid>0</NumberOfHoursPaid>
<ReturnToWork>
  <ReturnToWorkIndicator>Y</ReturnToWorkIndicator>
  <ReturnToWorkDateTime>1900-01-01T01:01:01-05:00</ReturnToWorkDateTime>
</ReturnToWork>
<ReturnToRegularDuties>
  <ReturnToRegularDutiesIndicator>Y</ReturnToRegularDutiesIndicator>
  <ReturnToRegularDutiesDateTime>1900-01-01T01:01:01-05:00</ReturnToRegularDutiesDateTime>
</ReturnToRegularDuties>
<PaymentsAnticipated>
  <PaymentsAnticipatedIndicator>Y</PaymentsAnticipatedIndicator>
  <TypeOfBenefitsPaid>TypeOfBenefitsPaid1</TypeOfBenefitsPaid>
  <LengthOfPayments>LengthOfPayments1</LengthOfPayments>
</PaymentsAnticipated>
<GeneralExplanation>GeneralExplanation1</GeneralExplanation>
</EarningsInfo>
<Declaration>
  <EarningsConfirmName>EarningsConfirmName1</EarningsConfirmName>
  <EarningsConfirmDate>1900-01-01</EarningsConfirmDate>
</Declaration>
<ReportProperty> WorkerEarningsForm</ReportProperty>
</WCBNSEarningsReportForm>
</WCBReportForm>

```

## Sample One Injured Worker Submission Response Messages

This section contains sample success and error response messages similar to those received upon submitting an Employer Report. The Business Partner's Web Service client should be able to receive and process these messages.

**Figure 13 - Sample Successful Injured Worker Submission Response Message**

```
<?xml version="1.0" encoding="utf-8"?>
<ReportResponse xmlns:xsd="http://www.w3.org/2001/XMLSchema" xmlns:xsi="http://www.w3.org/2001/XMLSchema-instance" xmlns="http://B2B.worksafens.ca/WCBNS-v1">
  <Acknowledgement>
    <TransactionDateTime>2016-02-07T09:54:02.1439602-08:00</TransactionDateTime>
    <TransactionIdentifier>3dcc158f-b1c9-4444-b051-c3e3240c0079</TransactionIdentifier>
  </Acknowledgement>
</InjuryReportResponse>
```

**Figure 14 - Sample Unsuccessful Injured Worker Submission Response Message**

```
<?xml version="1.0" encoding="utf-8"?>
<ReportResponse xmlns:xsd="http://www.w3.org/2001/XMLSchema" xmlns:xsi="http://www.w3.org/2001/XMLSchema-instance" xmlns="http://B2B.worksafens.ca/WCBNS-v1">
  <ErrorNotification>
    <TransactionDateTime>2005-02-07T09:57:52.9771410-08:00</TransactionDateTime>
    <TransactionIdentifier>3dcc158f-b1c9-4444-b051-c3e3240c0079</TransactionIdentifier>
    <Error>
      <ErrorCode>WCBNS-V1E0010B</ErrorCode>
      <ErrorDescription>Accident Event Date cannot be in the future.</ErrorDescription>
      <ErrorNode>
        <NodeName>AccidentEventDate</NodeName>
        <NodeValue>2006-12-31</NodeValue>
      </ErrorNode>
    </Error>
  </ErrorNotification>
</EmployerReportResponse>
```



## **Appendix E – Environments**

### **Production**

Used to receive Injury Report form and Earnings report form submission from external Business Partners. Due to the nature of the data being transferred, security is critical

TCP/IP Ports will need to be exposed to the Internet or through dedicated links to allow remote Business Partners to connect and submit forms to WCB. The use of TLS links / VPN or other secure, encrypted channels are recommended.

### **Conformance Test**

As new Business Partners are on boarded or changes to interface are enabled over time, this environment will allow them to test their system implementations, changes and updates prior to applying these changes to the production environment.

This will minimize errors in production and help to ensure a better quality of claims data into the production systems.

## Appendix F. – Client Application Acceptance Criteria

Client Application Acceptance Test Criteria	
<b>1</b>	<b>Incident submission</b>
<b>1.01</b>	Partner application successfully sends WCBNS-v1 incident submission for each type of scenario that is applicable to the employer. (With or Without Earnings.)
<b>1.02</b>	Incident submission data sent to WCBNS and generated on the Injury Report is accurate and correct.
<b>2</b>	<b>Earnings submission</b>
<b>2.01</b>	Partner application successfully sends WCBNS-v1 Earnings submission.
<b>2.02</b>	On an Earnings submission, updates sent to WCBNS and generated for all sections of the Worker's Earnings Report and are correct.

## Glossary

TERM	DEFINITION
Employer's Report of Injury	See section: The Employer's report of Injury
HTTP(S)	Short for Hypertext Transport Protocol (Secure). A variation of the HTTP standard, this protocol uses Secure Sockets Layer encryption to securely transmit data across the Internet.
Internet	A global network connecting millions of computers, each of which operates independently. In order to recognize a computer, internet service providers assign a unique Internet Protocol (IP) Address to each computer.
Internet Protocol (IP) Address	An identifier for a computer or device on a TCP/IP network. Networks using the TCP/IP protocol route messages based on the IP address of the destination.
Protocol	An agreed-upon format for transmitting data between two devices. The protocol determines the following: <ul style="list-style-type: none"> <li>• The type of error checking to be used</li> <li>• Data compression method, if any</li> <li>• How the sending device indicates it has finished sending a message</li> <li>• How the receiving device indicates it has received a message</li> </ul>
Schema	In XML, the schema defines a document's structure and contents including nodes, each node's value parameters, and the parent/child relationships between nodes.
SOAP	Short for Simple Object Access Protocol, a lightweight XML-based messaging protocol used to encode the information in Web service request and response messages before sending them over a network. SOAP messages are independent of any operating system or protocol and may be transported using a variety of Internet protocols, including SMTP, MIME, and HTTP.
SSL	Short for Secure Sockets Layer, a protocol developed by Netscape for transmitting private documents via the Internet. SSL uses a private key to encrypt data that's transferred over the SSL connection. Both Netscape Navigator and Internet Explorer support SSL, and the protocol is widely used to transmit confidential information, such as credit card numbers. The encryption is highly secure.
WCBNS Claim Processing System	The WCBNS Claim Processing System comprises all business and technological processes involved in registering and processing injury reports.
Web Service	The term Web services describes a standardized method of connecting Web-based applications using the XML, SOAP, WSDL open standards over an Internet protocol, frequently HTTP. Used primarily as a means for businesses to communicate with each other and with clients, Web services allow organizations to exchange data securely and simply without detailed knowledge of each other's internal IT systems. Web services are sometimes called application services. See section 3.1 - Definition of WCBNS-v1 Web Services.
WSDL	Short for Web Services Description Language, a specification developed by the W3C. A WSDL is published by a web service and describes the web service, how to connect to it, and the services it offers. For more information, see section WCBNS-v1 WSDL.