



# **WE DEMAND: LISTEN TO OUR DOCTORS**

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## **Background: OUR DOCTORS KNOW US BEST**

In 2016 and 2017, a series of reports were released by injured worker groups, labour organizations, and legal clinics that said what injured workers and advocates have long known: There are serious problems with the way that the WSIB considers medical evidence.\* These reports highlighted a range of issues, including failing to heed medical advice regarding readiness to return to work, insufficient treatment, blaming 'pre-existing conditions' for injuries clearly caused at work, questionable use of Board funded specialty clinics, using "expected recovery times" to declare a worker healed, purchasing reports from private medical consultants who never meet the worker (also called "paper doctors"), and even simply ignoring the available medical evidence all together.

## **Why is this important?**

When someone is injured or sick, one of the most important relationships they have is with the treating healthcare professionals that are helping them to get better. The doctors, nurses, psychologists, and physiotherapists who are treating injured workers know more about your conditions than anyone else. And yet the WSIB ignores the advice of injured workers' doctors and cuts their benefits or sends them back to work before they are medically ready.

When someone gets sent back to work too early and against their doctor's advice, they risk re-injury. When an injured worker's benefits are cut before they are better, they face poverty and all of the social and medical problems associated with it.

### **\*Further Reading:**

***No Evidence: Decisions of the WSIB*** - by IAVGO Legal Clinic, 2017

***Bad Medicine*** - by IAVGO Legal Clinic and Anthony Singleton, 2017

***Prescription Overruled*** - by ONIWG and Ontario Federation of Labour, 2016

## Did You Know...

- *Medical expenses for injured workers are supposed to be paid for by the compensation system, not Ontario's public health insurance plan (OHIP). This means that often when a medical expense for an injured worker is denied by the WSIB, the burden of that cost falls on every taxpayer in the province.*
- *A recent review of just one year of appeals tribunal decisions found hundreds and hundreds of examples of cases in which the WSIB inappropriately ignored medical evidence on file in order to reject a worker's claim.*
- *Some of the fee schedules used by the WSIB to pay healthcare professionals for services offer financial incentives for providers to end care sooner.*

## What is the demand?

The WSIB must listen to injured workers' treating health care team.

## What are the solutions?

- **Institute clear legislation that prioritizes and respects the evidence put forward by the treating health professionals** who know the injured workers best. Address gaps in information with treating doctors before seeking outside opinions.
- Establish a process **independent of the WSIB** to resolve medical disputes.
- When medical consultants are necessary, the reasoning for this must be quickly and clearly communicated to the worker, and the **doctors should be drawn from a roster maintained by an independent body**. The 'paper doctor' role should be re-imagined as one of supportive case-consultant, rather than end-of-the-road expert opinion.
- Before deciding that a worker has recovered from an injury, **decision-makers should have a report from the worker's treating physician** verifying recovery.
- When it is determined that a worker has a permanent disability, this worker's **"Non-Economic Loss" assessment must be done by a physician in person**, rather than by a WSIB nurse consultant who simply reads the file.