

EXPERIENCES, IMPACTS AND SERVICE NEEDS OF INJURED AND ILL WORKERS IN THE WSIB PROCESS: EVIDENCE FROM THUNDER BAY AND DISTRICT

KEY FINDINGS

Northwestern Ontario workers and their service providers described their experiences with workplace illnesses and injuries, including:

- Direct physical, psychological, social, recreational, financial, and occupational impacts from the workplace injuries and illnesses themselves
- Additional negative impacts from the worker compensation system itself
- Care and recovery complications due to the unique characteristics of rural, remote and northern contexts.

Implications and conclusions

- Workers and service providers suggested system improvements including:
 - Streamlining and explicating WSIB processes
 - Increasing WSIB continuity of care
 - Improved access to regional support services through arms-length navigators for rural, remote and northern workers.
- Stakeholders such as policymakers, the WSIB and community service providers can use these findings to improve supports for Northwestern Ontario injured workers
- Special considerations are needed to promote equity in rural, remote and northern workers' timely recovery, improved well-being, and sustained return-to-work.

“...you get into the process and if you don't have any help you are overwhelmed, it is just set up...to make people give up.” – Injured Worker

Individuals encounter a cascade of negative physical, social, and psychological impacts when they are hurt or become ill at work, such as:



Pain



Loss of mobility or permanent injury



Financial distress, loss of assets



Psychological distress, concerns about the future, family strain

Ontario's Workplace Safety and Insurance Board (WSIB) is supposed to help injured and ill workers, but the process may be long, demoralizing, and damaging to workers and families, especially when injuries or illnesses are complex^{1,2}.

Claims and appeals can be processed slowly, services can be discontinued prematurely, or needed services and wages can be denied outright^{3,4,5}.

Recourse pathways and resources for individuals appealing claims denied by the WSIB are fragmented and scarce, particularly in Northern Ontario. As a result, the risk of workers developing mental health concerns related to the WSIB process itself is high¹.

Stakeholders such as the WSIB, unions, and healthcare providers need information about:

- How are injured and ill workers are affected by the WSIB claims and appeals processes
 - Overall and in unique contexts, such as the rural, remote and Northern communities in the District of Thunder Bay
- The types and extent of mental health services needed to support this vulnerable and highly likely distressed group.
- Strategies for improving systems designed to support injured and ill workers, overall and specifically within in rural, remote and northern contexts

The purpose of this research was to describe the experiences and mental health needs of injured and ill Northwestern Ontario workers in the WSIB process, in order to promote system improvements.

How we Conducted the Research

Between November 2020 and March 2021, Lakehead University researchers recruited injured and ill workers, and social service providers with WSIB experience, from across the City of Thunder Bay and its District communities to participate in the study.

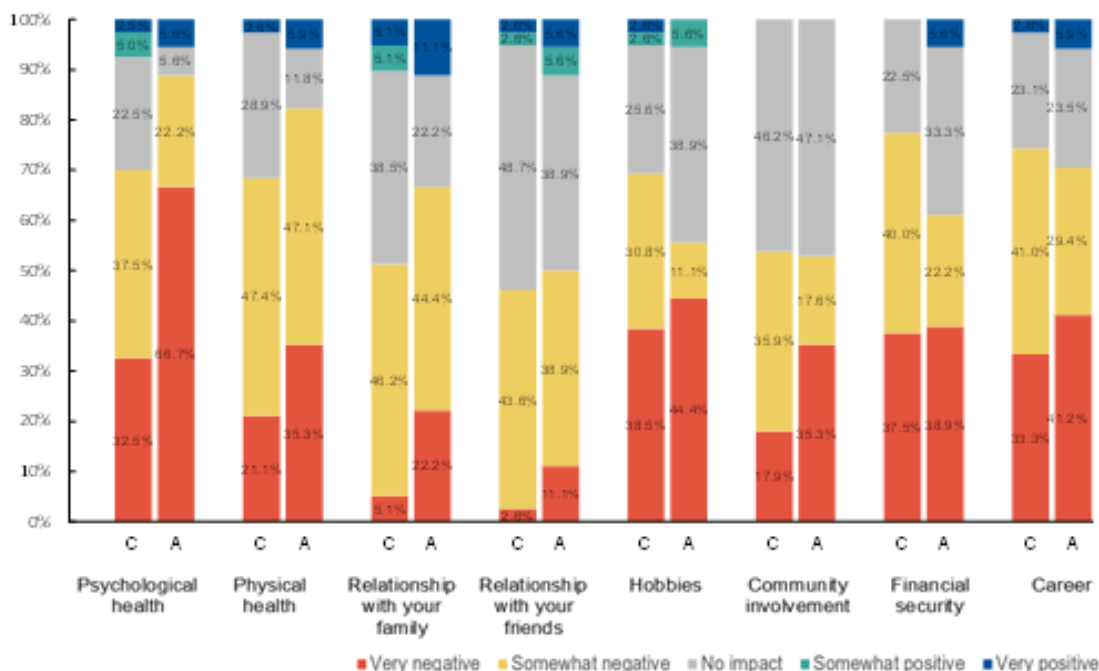
On-line survey: Forty (40) injured and/or ill workers completed an on-line survey about their mental health, social service, and legal system needs while involved with WSIB.

Interviews: An additional 16 injured and ill workers and eight (8) WSIB-experienced community service providers completed interviews addressing similar themes.

Research Findings

Injured and ill workers reported that the WSIB processes had negative impacts on their psychological and physical health, relationships with families and friends, their hobbies, community involvement, financial security, and careers. These themes were apparent in surveys and in interviews with workers and service providers.

Workers reported that they were “Very” or “Somewhat” negatively impacted by the WSIB claims and appeals processes in multiple ways.



Note: Percentages (%) represent the frequency of responses of n=40 injured workers who filed claims and n=18 injured workers who appealed WSIB decisions. Claim are labelled “C” and appeals are labelled “A”

Workers and providers identified nine WSIB process impacts on mental health:

1. Financial anxiety and insecurity
2. Family role instability and conflict
3. Frustration and anger
4. Guilt and shame
5. Helplessness and hopelessness
6. Job insecurity
7. Loss of professional or occupational identity
8. Retraumatization
9. Social isolation

They also identified system factors that affected their experience

Claims - Top Challenges:

- Communication with WSIB (72.5%),
- Paperwork (55%)
- Finances while off work (55%)
- Medical expert assessment (47.5%)
- Going through the process while injured/ ill (45%)

Appeals – Top Challenges:

- Communication with WSIB (77.8%)
- Paperwork (50%)
- Medical expert assessment/consultation (38.9%)
- Going through the process while injured/ ill (72.2%)

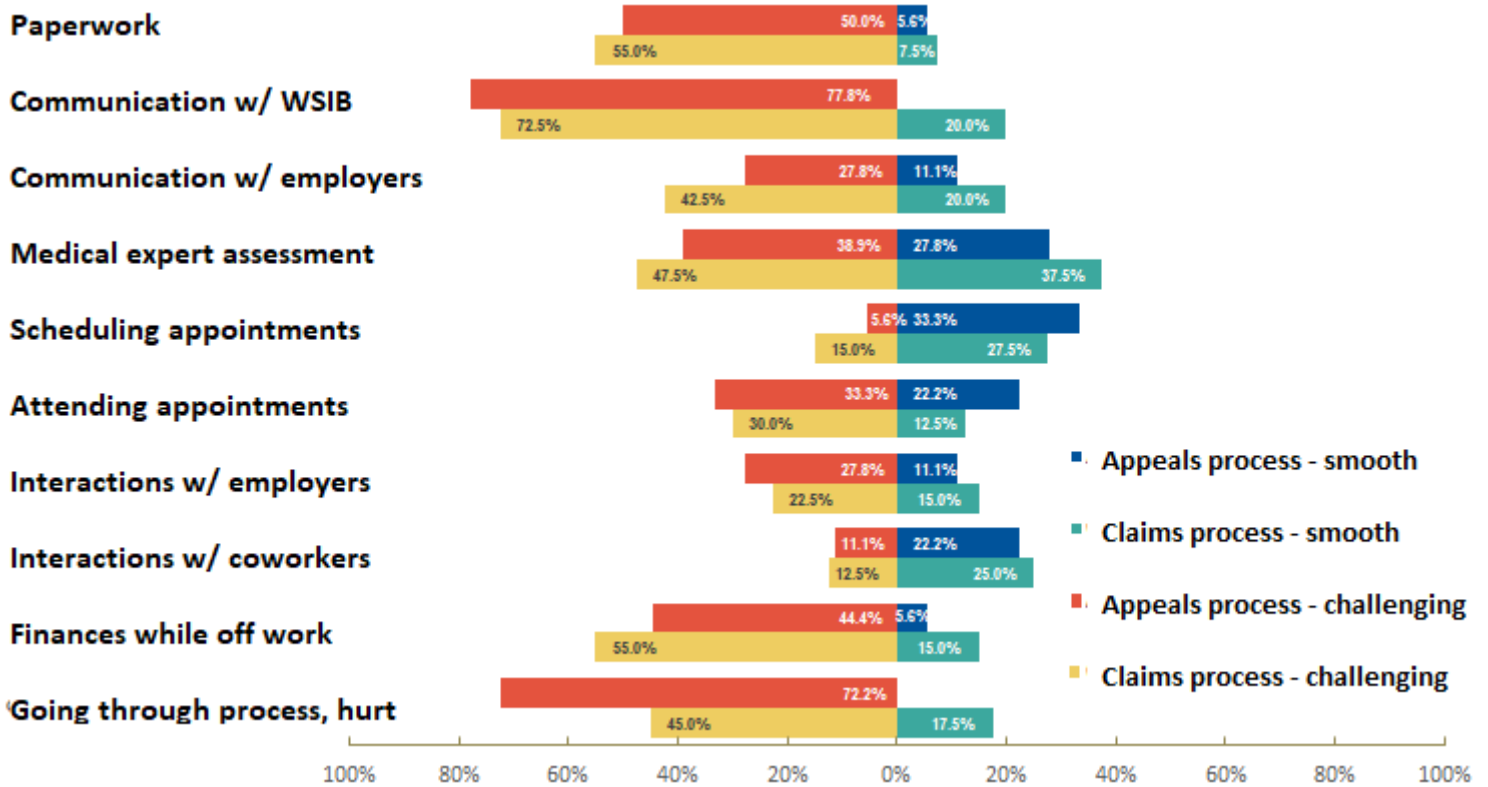
“I’m a single mom, my kids live with me full time, I’m 100% responsible for them, and I’m getting calls about my vehicle being repossessed. And then I can’t make my mortgage payments. All these things that add to already, like you’re already mentally not coping well.” – **Injured Worker**

“You feel guilty that you’re incapable of doing the one thing that you wanted to do.” – **Injured Worker**

“I had to spend hours every day on the telephone, quintessentially leading WSIB by the hand to do what they were supposed to do”. – **Injured Worker**

When [injured workers] phone, they never know if they’re going to get a different person. And if that person will have different opinions about what [services] they can access.” – **Service Provider**

Injured and ill workers described which aspects of the WSIB process went smoothly, were challenging



Note: Percentages (%) represent the frequency of responses for n=40 injured workers who reported on their experiences filing a claim and a subset of n=18 injured workers who appealed the decision of a claim.

Injured and Ill Workers Identified Protective and Risk-Promoting Aspects of the WSIB Process

Worker-identified protective (i.e., positive or experience-enhancing) factors were:

- 1) Access to adequate services (e.g. psychological),
- 2) Introduction of a WSIB online portal to coordinate and file claims and appeals, and
- 3) WSIB transparency (i.e., instances when workers knew exactly what to expect from WSIB and what procedures to follow).

Worker-identified risk (i.e., negative, or experience-detracting) factors specific to WSIB included:

- 1) Care coordination and treatment planning issues (e.g., accessing and aligning services between providers),
- 2) Communication challenges (e.g., difficulty getting in touch with WSIB representatives),
- 3) Paperwork (e.g., total amount, complex nature),
- 4) Staff turnover and continuity of care (e.g., having to repeat basic injury/illness information to multiple new workers), and
- 5) Transparency (e.g., uncertainty about process steps and requirements).

Worker-identified broader system risk factors included:

- 1) Location and ability to access medical experts for assessments, consultation, or services,
- 2) Employer and union relations (e.g., pressure from employers to return to work, or work in ways negatively impacting recovery, or tensions between unions and employers), and
- 3) Going through the WSIB process while injured or ill (e.g., because it is complex, requires multiple steps taking away time for rest and recovery).

Rural, Remote and Northern-Specific Concerns

Well-known, regional health services issues affected the workers in this study, including:

- Insufficient numbers of providers to meet the population need
- Low or no access to primary care providers had cascading effects on workers
 - Primary care providers must assess the need for and initiate referrals to specialists, as well as plan and coordinate assessments and care.
- Communication infrastructure issues, including low or no access to reliable internet or telephone service to enable access to care or efficient coordination of claims and appeals.
- Limited access to specialist providers was also problematic, creating:
 - Long waitlists for local providers
 - Costs, challenging logistics and time for travel to assessments or care.
 - The COVID-19 pandemic also restricted travel for several
- Cultural impacts of workplace injury, including loss of equipment for local recreational past-times such as boats and snow machines, which serve as transportation and connection to community, when their income was not adequately replaced.

A Path Forward: Potential improvements to the WSIB system in Thunder Bay city, District, and overall

- Factors associated with the presence of claim and appeal-related psychological distress are modifiable⁶.
- Policies that require individuals to sell all of their belongings in order to qualify for benefits are likely to have unintended, negative impacts on the overall recovery of people who become hurt or ill at work.
- Protective aspects of the WSIB process that can be maintained and enhanced for potentially underserved groups include access to adequate support services (mostly psychological or legal) and the new online portal to coordinate file claims and appeals.
 - WSIB may be able to further leverage technology to simplify and enhance workers' experiences.

Worker and service provider specific suggestions for improvement to the system that could improve worker well-being included:

- Creating arms-length navigators to help workers understand and move effectively through WSIB processes
- Enhancing WSIB employee compassion
- Increasing continuity of care (e.g., more opportunity to speak with WSIB representatives familiar with workers' cases)
- Improving access to/knowledge about support services within *and* outside of WSIB-funded services
- Increasing responsive communication from WSIB, and
- Increasing transparency about WSIB's role (i.e., insurer only; not advocate) and the claims and appeals processes overall.

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