



**WORKSAFE** **WHSCC** **CSSIAT**  
**TRAVAIL SÉCURITAIRE**

# 2007

## Report to Stakeholders



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# Letter from the Chair and President and CEO

On behalf of the board of directors, we are pleased to present this Report to Stakeholders and to take the opportunity to speak to stakeholders on the Report of the Independent Review Committee.

In 2007 the WHSCC met the targets set for the organization by our board of directors, who continue to review and update our goals and strategic plan. The staff of the WHSCC continues to be focused on results. We believe that New Brunswick workplaces are safer and our injured workers are being treated better as a result of our board's leadership and our employees' commitment.

This report on performance related to the goals set by our board demonstrates just that. We've met targets for each of the goals and we are particularly pleased with the results of the independent "satisfaction surveys." We want to acknowledge the high levels of response we get to these surveys. Our stakeholders' feedback is very important to us.

It is gratifying that the Independent Review Panel established by the Honourable Ed Doherty to review WHSCC concluded that, in comparison to other jurisdictions, the system of workers compensation is working well in N.B.

However the most important feature of the panel's report, entitled "Strengthening the System," relates to the important role that the stakeholders must play in the governance of this system. The review panel reaffirmed the Meredith Principles that were fundamental to establishing this system almost 100 years ago. The panel states that the compensation system should be governed by an autonomous board that is non-political and financially independent from government. The panel states, with emphasis, "the board of directors must be stakeholder driven."



*Doug Stanley, President & CEO*

*Roberta Dugas, Chairperson, Board of Directors*

# Letter from the Chair and President and CEO

Today the system is financially sound and is delivering service to the satisfaction of the stakeholder groups. Our ability to continue doing that depends on the commitment of both our board and our stakeholders to provide us with good and capable direction through their chosen representatives.

It has been a pleasure to serve the organization in 2007. In the coming year we will address all the review panel's recommendations, and, most significantly, we will focus more of our resources and attention on occupational health and safety. This will be the challenge as we grow with the

New Brunswick economy. We want everyone who goes to work in our province to feel confident they are going to a healthy and safe workplace.

The Independent Review Panel recommended that the WHSCC consult more with stakeholders and in the coming year we will seek more opportunities for dialogue with stakeholders.



Roberta Dugas  
Chairperson, Board of Directors



Doug Stanley  
President and CEO



# The Foundation of the Workers' Compensation System

In 1910, Justice William Meredith was appointed to a Royal Commission to study worker's compensation in Ontario. In his report, published three years later, Meredith proposed a trade off where workers gave up the right to sue their employers in exchange for no-fault compensation benefits. Meredith's concepts, known as the Meredith Principles, became the basis for workers' compensation legislation in Canada.

Canada's first Workers' Compensation Act was proclaimed in Ontario in 1915, while New Brunswick's Workers' Compensation Act was enacted in 1918. Although the Act has evolved to reflect a changing economy and workforce, the roots of our workers' compensation system continue to be solidly embedded within the Meredith Principles.

There are five Meredith Principles:

- **No-fault compensation:** Workplace injuries are compensated regardless of fault. The worker and employer waive the right to sue. Fault becomes irrelevant, and providing compensation becomes the focus.
- **Collective liability:** All employers contribute to a common fund, sharing the total cost of the compensation system.
- **Security of payment:** A fund is established to guarantee that compensation monies will be available. Injured workers are assured of fair and prompt compensation and future benefits.
- **Exclusive jurisdiction:** All compensation claims are directed solely to the compensation board. The board is the decision-maker and final authority for all claims, and has the power and authority to judge each case on its own merits.
- **Independent board:** The governing board is both autonomous and non-political. The board is financially independent of government or any special interest group. The administration of the system is focused on the needs of its employer and worker clients, providing efficient and impartial service.

## Members of the WHSCC 2007 Board of Directors

*Front row, left to right:*

Ron Hyson, Employer Representative;  
Roberta Dugas, Chairperson;  
Doug Stanley, President & CEO;  
Brad Brinston, Worker Representative.

*Back row, left to right:*

Conrad Pitre, General Public Representative;  
Morris Mendelson, Worker Representative;  
Sharon Tucker, Worker Representative;  
Paul LeBreton, Chairperson, Appeals Tribunal;  
Lin Hupman, Employer Representative.

# Vision, Mission, Mandate and Values

## Vision

### Vision

Healthy and safe workplaces in New Brunswick.

## Mission

### Mission

The Commission will promote a safe and healthy work environment to the workers and employers of New Brunswick, and efficiently provide quality services, just adjudication, and fair administration of the legislation.

## Mandate

### Mandate

Promote the creation of a workplace culture in which all employees and employers view all occupational diseases and accidents as being preventable.

Provide timely compensation benefits including rehabilitation, medical aid, vocational counselling and safe return-to-work services to injured workers.

Provide sustainable insurance and insurance-related services to the employer community.

Provide recommendations and advice to government with respect to legislation, and publish such reports, studies and recommendations as the Commission considers advisable.

## Values

### Values

We dedicate ourselves to the provision of prompt, effective, efficient, and caring services to each of our clients.

We believe that a team approach ensures that all members of the Commission are working towards a shared Vision, Mission, Values, and Goals.

We are committed to providing competent and energetic leadership that is focused on a clear direction for the Commission.

We ensure that our decisions are made with integrity, credibility, and accountability.

We ensure that our communications are based on trust, mutual respect, openness, and clear and reliable information.

We manage our human, material, and financial resources effectively in responding to our mandate and established priorities.



## Goals

### **Safety Goal**

Our vigorous pursuit of a safe work culture will lead to a decline in the overall frequency of accidents and a significant decline in the overall frequency of accidents in industries and firms where our resources are focused.

### **Service Goal**

We will provide prompt, effective, efficient, just, fair, and caring services to each of our clients.

### **Return To Work Goal**

We will decrease the time by which injured workers return or are ready to return to employment.

### **Efficiency Goal**

We will hold the assessment rates to employers at the lowest level possible, consistent with the best possible benefits to clients.

### **Staff Satisfaction Goal**

Our employees will consider the Commission a good place to work.



# Key Statistical Indicators

Key Statistical Indicators	2006	2007
Total claims created (can include claims with no application for benefits)	25,203	25,899
Claims recorded, no benefits paid	13,427	13,966
Total claims adjudicated	13,042	12,987
Total claims accepted	11,925	11,816
Lost-time claims	6,025	6,135
No lost-time claims	5,892	5,674
Work-related fatalities occurring	9	8
Average payment per claim	\$4,432	\$4,448
Average days lost per lost-time claim	74	70
Current year claims cost incurred (000s)	\$114,788	\$114,080
Claims payments made for current and prior years' injuries (000s)	\$127,151	\$127,001
Claims costs incurred for current and prior years' injuries (000s)	\$159,864	\$203,483
Total benefits liabilities – assessed employers	\$799,831	\$856,983
Total benefits liabilities – self-insured employers	\$121,142	\$140,472
Fund balance (in millions)	\$102.5	\$54.5
Percentage funded	111.0%	105.4%
Administration costs – Excludes self-insured and occupational health and safety (000s)	\$19,805	\$19,868
Administration costs – Occupational health and safety (000s)	\$8,095	\$8,115
Assessment revenue (000s)	\$144,858	\$148,690
Total premium revenue (000s)	\$172,828	\$194,168
Assessable payroll (000s)	\$6,966,356	\$7,257,752*
Provisional average assessment rate	\$2.14	\$2.10
Actual average assessment rate	\$2.08	\$2.08*
Market rate of return on portfolio	13.3%	-0.4%
Average calendar days from date of disablement to first cheque for manageable claims	20.1	20.7
Average calendar days from injury to first payment issued (all claims)	38.6	38.7
Maximum assessable earnings	\$51,900	\$53,200
Number of assessed employers	13,633	13,718
Number of New Brunswickers working	355,400	362,600
Number of workers covered by the Workers' Compensation Act	291,900	301,600
Number of workers covered by the Occupational Health and Safety Act (excludes workers covered by federal legislation)	333,700	344,300
Number of workplace health and safety inspections	7,104	6,838
Number of orders (violations of the Occupational Health and Safety Act) written	5,960	5,193
Number of serious accident investigations**	115	176
Number of workplace health and safety workshops	546	568
Appeals received	725	675
• initiated by workers (or their representative)	675	624
• initiated by employers (or their representative)	50	51
Appeals resolved	558	648

\*Projected, pending receipt of final figures for 2007.

\*\*Serious accident investigations include fatalities, crushing injuries, loss of vision in at least one eye, fractures (excluding fingers and toes), and any injury requiring hospital admission as an in-patient (amputations, burns, etc.).

Note: Certain figures may have been restated to reflect new information.



**Goal:** Our vigorous pursuit of a safe work culture will lead to a decline in the overall frequency of accidents and a significant decline in the overall frequency of accidents in industries and firms where our resources are focused.

# Safety

## Measure

A decline in the overall accident frequency rate:

- Within the province.
- Compared to other workers' compensation jurisdictions.
- By payroll.

## Results

### Province-wide

The number of workplace accidents decreased to an estimated 3.43 accidents per 100 full-time employees, representing a 3.9% decrease from 2006 (3.57 per 100 workers), and the lowest provincial accident frequency rate recorded.

### Jurisdiction

Comparison information for the Canadian jurisdictions is available for 2006. The lost-time accident frequency in New Brunswick for 2006 improved to 1.33 claims per 100 full-time employees, down from 1.42 in 2005. This represents the lowest ratio of the reporting jurisdictions.

### Payroll

The number of accidents per \$1 million in assessable payroll continued to decrease in 2007, with 1.33 accidents per \$1 million in payroll. This is down from 1.39 accidents in 2006, and from a high of 1.55 in 2002. (Payroll figures are adjusted for inflation.)

## Highlights:

- The WHSCC conducted 6,838 workplace inspections, and wrote 5,193 orders under the *OHS Act*.
- There were eight work-related fatalities, and nine in 2006.
- The WHSCC worked with the following focus industries: sawmills, nursing homes, fish processing, and supermarkets. Commission staff met with employer associations in these industries to discuss injury issues, recommend improved practices, and encourage active promotion of health and safety. Health and safety officers increased their visits and inspections to these industries, and Commission staff were available to help them develop and enhance health and safety programs. The number of accidents fell by 15% for these four industries (from 1,690 to 1,443), and the accident frequency fell from 6.76 per 100 workers to 5.72, a 15% improvement.
- The WHSCC also continued its work with focus firms (companies with poorer accident and cost records). Accident frequency in focus firms decreased by 15%, from 14.4 accidents in 2006 to 12.2 in 2007.
- In addition to the focus industries and firms, the WHSCC continued to promote and enforce zero tolerance in areas with a high incidence of fatalities, injuries and near misses – trenching, lockout and tag, and fall protection.
- The WHSCC continued its social marketing campaign, – *Injuries are No Accident*, launched in the fall of 2006. Research shows that 61% of Canadians, and 69% of New Brunswickers, believe that workplace injuries are inevitable. The campaign is designed

## Stakeholder Profile

In 2001, the WHSCC identified nursing homes as a focus industry because of a high injury rate. And within this focus industry, Foyer régional Ste-Élizabéth in Baker Brook had an especially high injury frequency: "One of the worst," said the nursing home's executive director, Paul Couturier.

But while nursing homes have continued to remain a focus industry, Foyer régional Ste-Élizabéth has turned their status around, becoming a model for other nursing homes in the province. Since adopting the WHSCC's 5\*22 program in 2003, Foyer régional Ste-Élizabéth has reduced its injury frequency and lowered its assessment rates to an average of 35% below the industry rate. (5\*22 is a structured safety system, based on five fundamentals of health and safety, and 22 health and safety topics.)



Bernice Plourde

Paul Couturier

# Safety

to shift this attitude so that New Brunswickers view them as “unacceptable” rather than unavoidable.

- The WHSCC continued to actively promote youth safety. Targeted at teens, the No Mercy campaign is designed on the concept that the machinery and materials you work with show no mercy. The campaign included posters, educational resources, and branded give-aways all developed to drive traffic to our youth website – youthsafe.ca. The website speaks to young workers in their language, and offers all the information and resources they need to help them live and work safely. It also features sections for parents, educators and employers.
- In conjunction with the No Mercy campaign, the WHSCC and other sponsors brought back to New Brunswick the SmartRisk HEROES tour, seen by more than 10,000 high school students. The highly emotional presentation, hosted by a young injury survivor, graphically confronts the consequences of reckless, impulsive behaviour and compels viewers to embrace a passion for life.
- Close to 78,000 students received some form of health and safety orientation in the 2006-2007 school year. Significant activities included: distribution of Stella the Safety Skunk program into French elementary schools and launch of the Stella mascot; the launch of the No Mercy campaign; continued free access of the Passport to Safety program in high schools (4,000 students in 2006-07); and, the sponsorship of the third student safety video contest, through the Department of Education.
- The WHSCC developed and implemented a strategy to address the high number of MSI injuries, which account for 38% of all long-term claim costs.
- The WHSCC and the Canadian Federation of Independent Business (CFIB) implemented a joint campaign to educate small businesses in New Brunswick on their legislative duties and to help identify and control workplace hazards.
- The WHSCC’s education consultants conducted 568 workplace health and safety workshops around the province, on topics including due diligence, worker/employer responsibilities, accident investigation, developing health and safety programs, trenching, and fall protection.
- WorkSafe Services hosted a variety of public workshops throughout the province, which attracted 1,564 participants. Focus continued to be on the 3-day Joint Health and Safety Committee (JHSC) Core Training workshop. Other workshops covered topics such as Workplace Hazardous Materials Information System (WHMIS), rate setting, new JHSC legislation introduced in June, safety talks, and hazard identification and risk assessment.
- The 27th Annual Health and Safety Conference was held October 14-16 in Saint John, attracting more than 600 participants. The conference offered a selection of 22 workshops and a trade show with 30 exhibitors. Keynote speaker Duncan Hawthorne, President and CEO of Bruce Power, gave an impassioned speech on the responsibility of everyone to respect health and safety in the workplace and make it “job one.” Survey results for the conference overall were very positive.

## Stakeholder Profile (continued)

“Over the past three years, we’ve saved \$100,000. We can do a lot with that,” Couturier said.

“You’ve got to look at 5\*22 as an investment, not an expense,” he said. “An investment with huge payback. In less than 24 months we saw the financial payback. But more importantly, we saw payback in reduced injuries. You can’t put a value on that.”

Although the nursing home’s campaign to reduce injuries did not begin aggressively until 2003, awareness of the resources and options available to help them started in 2001, when Couturier became part of a provincial committee established to find solutions to the industry’s problems. This committee was composed of the New Brunswick Association of Nursing Homes (NBANH), two executive directors of nursing homes, and representatives from the Department of Social Development, CUPE, the New Brunswick Nurses’ Union, and the WHSCC.

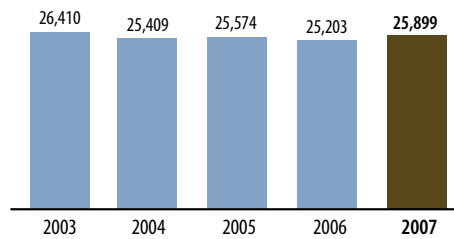
“We were lucky to have Mr. Couturier on this committee,” said Bernice Plourde, head of food services at the nursing home, and manager of their 5\*22 program. “To turn things around we needed to change the safety culture, and to do this you need buy-in from management. We needed their investment, and we got it,” she said.

Plourde said the road to success was far from easy. “It took a lot of hard work – everyone worked so hard; they gave 110%. Our 5\*22 meetings often lasted up to four hours, and we held them two to four times a month,” she said.

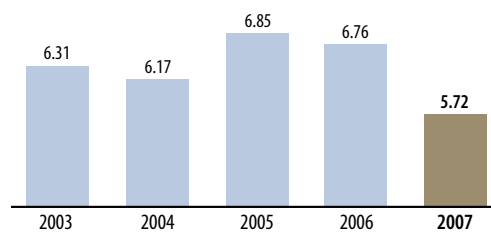
With the implementation of 5\*22, health and safety now takes up 50% of a new employee’s orientation, which includes packages of documentation and one-on-one discussions of specific job hazards. “An employee can’t start work until they’ve had this orientation, and we are sure they understand it,” Couturier said. “Even long-term employees must undergo the orientation if they change departments or jobs, as that usually involves a whole new set of risks,” he said.

- The WHSCC partnered with Potatoes New Brunswick and more than 30 local service providers to deliver a Progressive Agriculture Safety Day to more than 300 students in St. Léonard. This marked not only the first time the event was hosted in Atlantic Canada, but also the first time it was hosted in French. Elementary students moved through more than 13 safety stations to learn about safety at home, at school and in the workplace. The event's success prompted the planning of two more safety days for 2007-08.
- The WHSCC implemented an information campaign on pandemic planning.
- The WHSCC reviewed the home construction industry for health and safety risks and legislative compliance.
- The WHSCC and New Brunswick Community Colleges discussed ways to enhance their safety training courses.

WHSCC Claims Created in 2007



WHSCC Active Focus Industries Accident Frequency Rate  
Rate per 100 FTEs

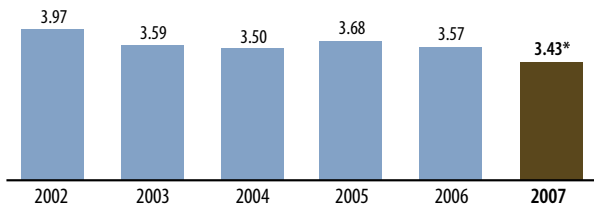


## Statistics

### Provincial Accident Frequency Rate

Rate per 100 FTEs

The accident frequency rate is calculated by dividing the number of claims by the number of full-time employees in a given year. A full-time employee or full-time equivalent (FTE) is defined as an employee who works the equivalent of 35 hours per week for 50 weeks of the year.



\*Projected

“5\*22 changed our work culture—it’s completely different now. Everyone takes responsibility for any hazards they see, no matter which department or job they’re in,” Plourde said. “Safety has become ingrained. The workers question everything, and are vigilant in helping find solutions to any hazards they see.

“It’s really remarkable. We went from worst to best,” she said.

“It’s an excellent program,” Couturier added. “And it’s here [at the nursing home] to stay.”

Martine Bélanger, a WHSCC health and safety consultant for the northwest region, applauds the nursing home’s efforts and success to date. “Management at Foyer Ste-Élizabéth accepted our help without hesitation to establish a health and safety management program to reduce their costs and losses resulting from workplace accidents. Management’s firm commitment and the hard work of employees allowed Foyer Ste-Élizabéth to not only turn the page and successfully implement a program, but

to reduce the number of accidents and change the safety culture internally. Foyer Ste-Élizabéth’s accomplishment is the result of a process that required time and effort, but that ultimately met the expectations of all parties involved,” Bélanger said.

## Statistics (continued)

### Prosecutions: Occupational Health and Safety Act

Number of:	2005	2006	2007
Charges	42	20	30
Employers charged	16	8	11
Owners charged	2	–	–
Supervisors charged	2	3	2
Contractors/subcontractors charged	–	2	2
Workers charged	–	–	1
Convictions	13*	19*	12
Charges dismissed	–	–	–
Charges withdrawn	17	21	8
Charges outstanding	28	13	19
Value of fines	\$35,715	\$85,600**	\$61,300

\*This number is not the number of individual counts for which a defendant was found guilty. An employer convicted of three counts shows up here as one conviction.

\*\*This includes fines levied in cases begun earlier but only concluded in 2006.

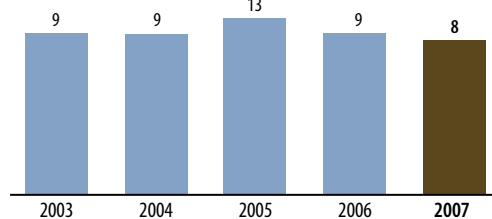
### Complaints\*: Occupational Health and Safety Act

Number of complaints:	2005	2006	2007
Filed	12	9	8
Allowed	2	1	2
Dismissed	68**	9	3
Resolved	1	4	0
Withdrawn	3	–	1
Outstanding	4	–	2

\*Note: Complaints filed in one year may not be concluded until the following year.

\*\*65 complaints were individual complaints against the same employer based on the same facts.

### Fatalities by Year of Accident



Note: Represents workplace fatalities by year of accident or disease, regardless of date of death.

## Measure

We will continue to maintain or exceed the high level of satisfaction, in excess of 80%, that both our injured worker and employer clients have come to expect.

## Results

### *Client Satisfaction Index: Injured Workers*

In 2007, 83% of injured workers indicated satisfaction with the Commission's service attributes included in the Client Satisfaction Index. This achieves the expectations established in the board's measure and demonstrates a 2% increase in satisfaction over the 2006 level.

### *Client Satisfaction Index: Employers*

In 2007, 84% of registered employers reported satisfaction with the Commission's service attributes included in the Client Satisfaction Index. This achieves the expectations established in the board's measure and is stable at the same level of satisfaction as in 2006.

Note: The Client Satisfaction Index examines injured workers' and employers' satisfaction with the Commission's delivery of service specifically as it relates to professionalism, willingness to listen, level of understanding, accuracy of information provided, amount of benefits, communications, timeliness of handling claims, promptness of service, respect, fairness, competency, and effective problem solving.

## Highlights:

- The Commission created 25,899 claim files. Approximately one-half of these files had no application for benefits or involved no claim costs (notification of "event" only or billing from physician with no subsequent application from the worker for benefits).
- The WHSCC adjudicated 12,987 applications for claims, a slight reduction (0.4%) from 2006; 1,171 were rejected as being non work-related or an uninsured employer. Of those accepted, 6,135 involved lost time of at least one day (a 1.8% increase over 2006), and 5,674 were no lost-time claims (medical costs only, and representing a 3.7% decrease from 2006).
- The Assessment Services Department hosted nine information sessions with employers, employer associations and groups.
- We consulted with stakeholders on possible changes to the *OHS Act* and the *WC Act* relating to accident reporting requirements and forestry regulations.
- The WHSCC's vocational evaluation and work recovery programs were recognized for excellence in service delivery and received a three-year accreditation by the Commission on Accreditation of Rehabilitation Facilities (CARF) International. The WRC, through these programs, became the first organization in New Brunswick granted this accreditation.
- The WHSCC's Workers' Rehabilitation Centre (WRC) continued to focus on improving communication with treating physicians to increase their knowledge of WRC services and improve their treatment planning for individual injured workers. Activities

## Stakeholder Profile

The WHSCC continuously strives to improve its services. In early 2006, after consultation with several employers across the province, the WHSCC introduced a shorter and simpler Form 67, the accident report that must be filled out and submitted to the WHSCC whenever there's a workplace injury. Soon afterwards, we looked at further improving this service by offering it electronically, and began developing the capability and testing it internally. McCain Foods Limited heard about the project and expressed a keen interest in participating in the pilot, and, in November 2007, McCains became the first external stakeholder to begin testing the service.



Scott Ring

Kim Jensen

# Service

included hosting an educational booth at the New Brunswick Medical Society Annual General Meeting in September and holding an accredited education program in conjunction with the WRC's annual Open House.

- We continued research on *The Role of Catastrophizing, Pain-Related Anxiety, Coping and Anger in Adjustment to Chronic Low Back Pain*, which began in March 2006. The goal of the research is to identify the biopsychosocial factors that contribute to a patient's communication of chronic musculoskeletal pain. The study will also examine what decision maker-related factors contribute to decisions about treatment, disability, pain, and compensation.
- The WHSCC continued to review its authorized medical service providers to ensure that workers receive the best treatment possible. We verify that providers are appropriately licensed through legislation licensing bodies, where available, and develop our own criteria when such bodies do not exist. The WHSCC also examines the quality of the medical services provided by its suppliers, through regular audits of physiotherapy clinics, work conditioning clinics and chiropractor services.
- The WHSCC continued to maintain a network of six family physicians (one in Edmundston, two in Moncton, one in Saint John, and two in Fredericton) to provide continuity of care for claimants without family physicians, and assist other family physicians and the Commission to develop holistic care plans. The Commission provides training to these physicians on employment-related health issues that most other family physicians may lack.
- The WHSCC's chief medical officer developed information binders for the WHSCC's medical service providers—family physicians, chiropractors and nurse practitioners. The binders cover frequently asked questions, disability duration guidelines and healing times, continuum of care and care management, return to work planning, the WHSCC drug formulary, and the use of functional restoration tools
- The WHSCC continued using an electronic prescription adjudication and payment system and enhanced the management of opioid prescriptions. After consultation with the New Brunswick Pharmacists' Association and the New Brunswick Medical Society, we changed how we cover authorization for opioids. By researching best practices, we developed controls for issuing opioid prescriptions, including providing information to pharmacy workers and increased physician responsibility for appropriate opioid prescribing. The controls include appropriateness of the opioid prescription to the injury, time limits and quantity limits, limitations on multiple physician prescribers and dispensing pharmacies, and controls on additives to reduce the street value of the drugs prescribed.
- The WHSCC's orthopaedic consultant provided continuing education sessions to nurse practitioners and physicians throughout the province. In co-operation with the New Brunswick Medical Society's Community Hospital Program, we provided 11 education sessions to physicians.
- We designed and implemented a service to submit claim applications and injury reports (Form 67) online. The service is currently being tested by a large employer.

## Stakeholder Profile (continued)

"McCain Foods Limited was a perfect partner for the pilot," said Carol Veysey, WHSCC's director of Adjudication and Benefit Services. "As one of New Brunswick's largest employers, and with a variety of operations, we felt they would be an ideal employer to help us pilot the electronic F67 and identify any areas of concern," Veysey said.

Kim Jensen is with the human resources department at McCains, and is responsible for processing the french fry plant's Form 67s. The electronic system cuts the work in half, she said.

"It's very user-friendly," Jensen said, "and it really cuts down on the paperwork. Much of the information that we had to manually input in the paper forms is already there, so it really cuts down on data entry. It's a lot faster."

The new service will relieve some of the pressure off the mandatory 3-day reporting deadline for employers. This is

especially important for companies such as McCains that can lose precious reporting time when some workers are on shifts of four days on, four days off, said Scott Ring, McCain's health and safety officer at the french fry plant.

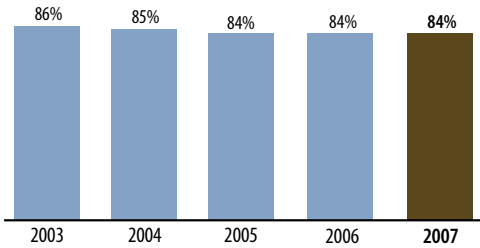
"We're really pleased with the service," Ring said. "We've been given good training and support up front from the WHSCC. And although we identified a few glitches early on, they were insignificant. At the end of the day, the electronic service is much more efficient – time-wise and for tracking purposes. It's more efficient on the WHSCC end as well. We get results back sooner," he said.

And while the service will simplify things for employers, it will also allow for quicker adjudication of claims.

The WHSCC hopes to roll out the electronic service to another 50 employers by the end of 2008.

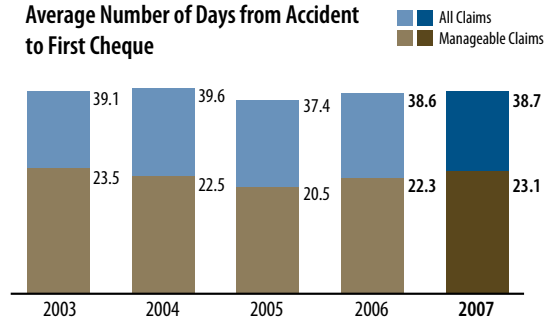
## Statistics

### Employers' Satisfaction Index (weighted for importance)

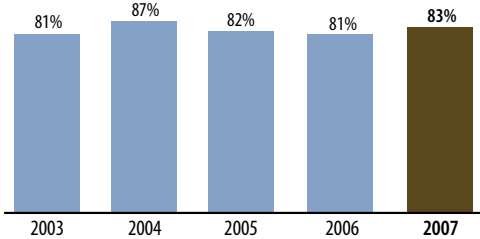


*Note: The Client Satisfaction Index (CSI) is a composite measure of the overall average satisfaction with the key service attributes believed to contribute to client satisfaction.*

### Average Number of Days from Accident to First Cheque



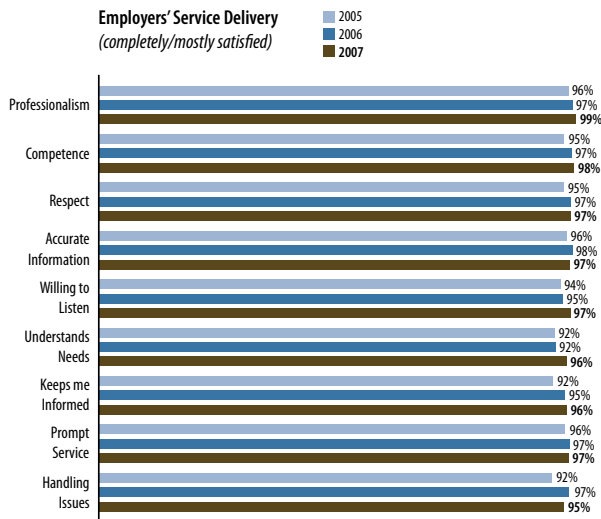
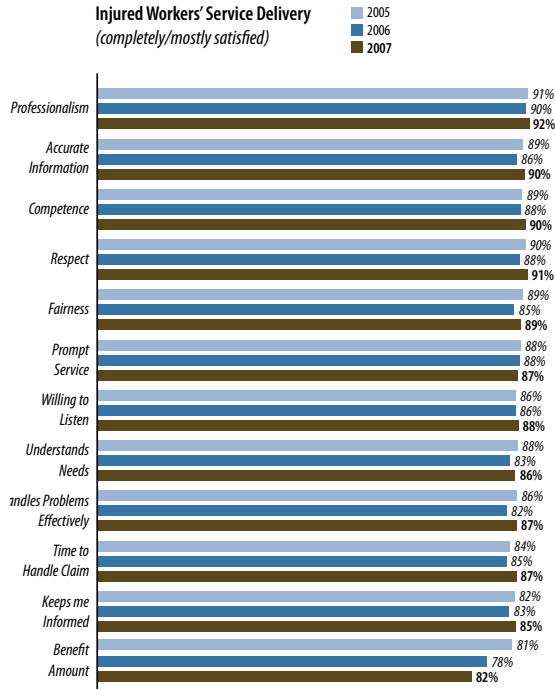
### Injured Workers' Satisfaction Index (weighted for importance)



*Note: The Client Satisfaction Index (CSI) is a composite measure of the overall average satisfaction with the key service attributes believed to contribute to client satisfaction. The level of importance rating of each service attribute is factored into the calculation.*

# Service

## Statistics (continued)





**Goal:** We will decrease the time by which injured workers return or are ready to return to employment.

# Return To Work

## Measure

The median of paid compensation days for claimants with a return to work goal.

## Results

The average number of days of paid compensation declined from 68 days in 2006, to 66 days in 2007 (average days paid for claims with a return to work goal).

Ninety-six percent of injured workers who lost time from work and are capable of work, return to employment following their injury. Four percent do not have employment immediately following closure of their claim; most of these workers return to their seasonal pattern of employment.

## Highlights:

- Some injured workers require more comprehensive support from the WHSCC to help them recover from their injuries and return to employment. This assistance is provided through case management teams located in the regional offices, and may last for several months, or, in the most severe cases, several years. In 2007, 4,584 claimants received these services.
- The WHSCC provides pension and long-term disability benefits to workers with a residual disability resulting from their accident. At the end of the year, there were 1,237 pre-1982 accident pensioners (a 3.7% reduction from 2006), and 2,509 injured workers receiving long-term disability (an increase of 2.2%). Pension benefits were provided to 527 spouses and dependants (a 4.4% decrease).
- The Commission's "Continuum of Care" model for case management is an incremental care and treatment approach to getting an injured worker safely back to employment at the earliest possible opportunity. This approach is evaluated on an ongoing basis to identify areas for improvement in process and services. In 2007, the Continuum of Care approach continued to be applied as a case management model for all injuries. Injury-specific progress milestones (disability duration guidelines – DDGs) alert case managers when a claim requires intervention.
- To help injured workers in their recovery, the WHSCC uses approved local clinics, in addition to the WRC, for physiotherapy, work conditioning, work hardening and work capacity evaluations. In its ongoing review of the quality of medical services, in 2007 we evaluated primary physiotherapy, work conditioning, gradual return to work, jobsite analysis, augmented work conditioning, injection-based pain treatment, and vocational rehabilitation. We've implemented a number of recommendations arising from those reviews.
- The WHSCC is conducting reviews of claim duration, management of shoulder injuries, chiropractic services, consultation and surgery wait times, goal-oriented physiotherapy for sub-acute low back pain (with Dalhousie University School of Physiotherapy), multi-disciplinary treatment, home care assessment and work capacity evaluations.
- Because about half of the WHSCC's injured workers in the work recovery program experience disturbed sleep, in June

## Stakeholder Profile

The fresh forest air, the sense of serenity, the intoxicating aroma of spruce and fir – all reasons why Tony Verge loved working in the woods. But working in the woods made Verge sick. Really sick. So sick that he was told he couldn't return to his job in the silviculture industry, a job he had been working at for 10 years. He couldn't even chop firewood any more, a task he enjoyed immensely. The then 41-year-old Newfoundlander had developed severe environmental sensitivities to pine, spruce and balsam.



Tony Verge

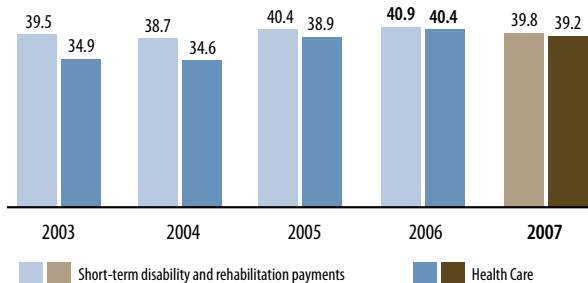
# Return To Work

the WRC began a collaborative research project on the *Insomnia Intervention Program* with Dalhousie University. The objective is to better understand the nature of the injured worker's sleep complaints and to develop an assessment, intervention and follow-up tool that will be used to help the injured worker sleep better. Research is being conducted with clients in the Work Recovery Program.

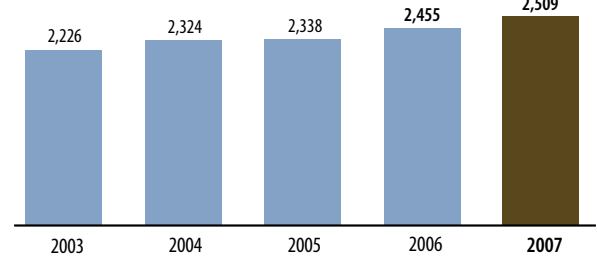
- The WHSCC offers employers training and help to implement workplace accommodation and return-to-work programs, which are intended to improve the potential for an early return to work by an injured worker. These programs are available through the regional offices.
- The WHSCC provided accredited training for New Brunswick physicians on treatment of injured workers.

## Statistics

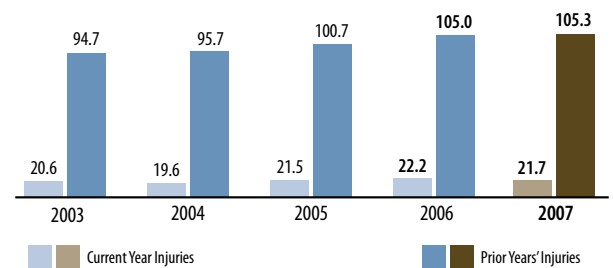
**Short-term Disability and Rehabilitation, and Health Care Payments (in millions)**



**Number of Injured Workers Receiving Long-term Disability Benefits at December 31**



**Benefits Payments (in millions)**



### Stakeholder Profile (continued)

Verge, a father of three, had been working seasonally in New Brunswick's woods, and maintaining his home in Newfoundland where he returned during the off-season. He said he had suffered with symptoms for close to five years. "Doctors would give me creams, but sometimes they would make it worse because I was allergic to some of the ingredients in the creams," he said.

His symptoms included severe itching and burning, peeling skin, with oozing lesions. "I would be so uncomfortable that as soon as I got home from work, I would just lie in bed." Verge said he would have to re-apply bandages three to five times a day. Finally his condition was properly diagnosed.

"I was surprised. I thought allergies were just watery eyes and sneezing. I didn't know they could be this bad," he said. "I didn't know they could cost me my job. When they told me I couldn't work in the woods any more, it was devastating. I was the

breadwinner in my family. Things were looking really bleak, and I didn't know where to turn."

Verge said he wasn't aware that help was available through the WHSCC. "I thought Worker's Comp [WHSCC] was for broken bones and amputations – things like that. And even then, I didn't know exactly what kind of help you [WHSCC] provided."

Verge's WHSCC case manager, Angela Dunham, and vocational rehabilitation specialist, Jeff Curtis, worked with him to identify alternative employment options.

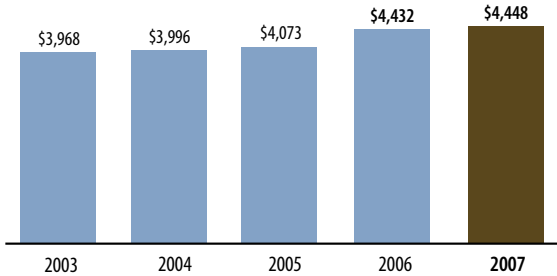
"Tony was easy to work with. He was particularly careful to ensure he understood the vocational rehabilitation process, and did a lot of research into his options," said Curtis.

"They were really up front with me," Verge said. "I knew exactly what was expected of me, and I got what was expected from them."

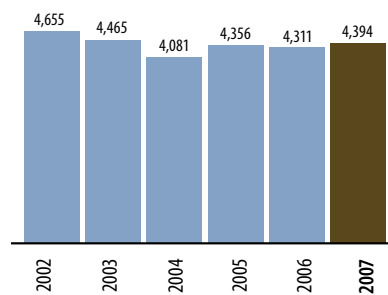
# Return To Work

The board of directors has set a goal and measure for reduced duration for those claimants with a return to work goal. These charts represent the WHSCC's performance against that goal.

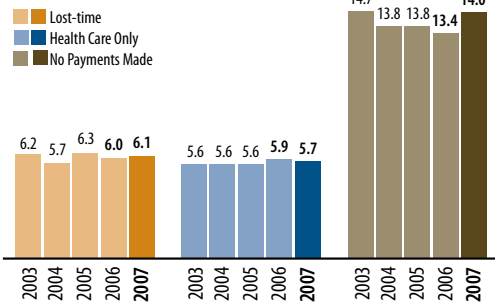
**Average Payment per Claim**



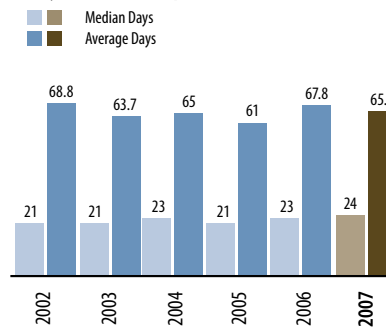
**Number of Claimants**



**Number of Claims Processed in 2007  
by Type (in thousands)**



**Days of Paid Compensation**



Verge decided on a career as a heavy equipment mechanic, and was able to take his training at a school in Newfoundland. Forty-two weeks later, in August 2007, he graduated, and only one month later he had a full-time job as a transport mechanic with R.E.M. Transport Ltd., in St. Stephen. And in the meantime, Verge's wife obtained full-time work in St. George, so the family was able to make a permanent move to New Brunswick.

"It certainly worked out," Verge said. "I'm really glad to be back at work. There's no way I could've done this without the help of the WHSCC."

# Return To Work

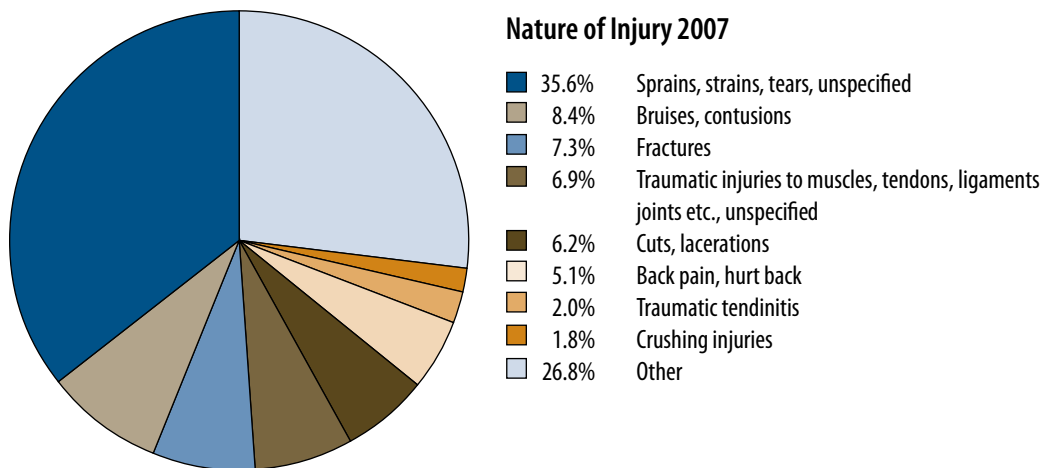
## Statistics (continued)

Injured Workers with Lost-time Claims						
	2002	2003	2004	2005	2006	2007
0-20 days	46.3%	45.2%	44.0%	45.9%	44.0%	43.6%
20-40 days	58.4%	57.2%	56.3%	57.5%	56.2%	56.0%
40-80 days	71.1%	70.4%	70.6%	71.8%	69.1%	70.3%
80-160 days	82.6%	83.3%	83.6%	84.7%	82.1%	83.2%
160-220	87.1%	87.5%	87.5%	88.0%	86.4%	87.6%
220-440	93.8%	93.6%	93.4%	93.2%	93.2%	93.1%
440-960	99.1%	98.7%	98.3%	98.5%	98.3%	98.4%
>960	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Proportion of time-loss claims closed in each year by number of paid time-loss days.

## Summary of Injured Worker Benefits for 2007:

When claiming:	Maximum Annual Earnings	Maximum Weekly Earnings	Percentage Rate for Determining Benefits	Maximum Weekly Benefits	Effective Date
No Dependents	\$53,200	\$1,023	85% of net	\$622.75	01-Jan-07
Dependent Spouse or Equivalent	\$53,200	\$1,023	85% of net	\$653.03	01-Jan-07



**Goal:** We will hold the assessment rates to employers at the lowest level possible, consistent with the best possible benefits to clients.

# Efficiency

## Measure

At a minimum, we will maintain a fully-funded liability.

## Results

The provisional 2007 assessment rate of \$2.10 represents a decrease of \$0.04 from the 2006 value. The decrease reflects an improvement in the Commission's funding status. In 2007, New Brunswick's rates continued to remain the lowest in Atlantic Canada.

At the end of 2007, investments held to meet future benefit obligations for past injuries reached \$880 million, representing a 105.4% funded liability.

## Highlights:

- Payments to injured workers or third parties on their behalf totalled \$127 million, consistent with 2006's payments of \$127.2 million.
- Investment income fell 105.2%, from \$101.9 million in 2006 to a loss of \$5.3 million in 2007. Most of this decrease is attributable to lower unrealized gains on the WHSCC's equity investments.
- Third party recoveries provided cost relief to employers of approximately \$2.7 million, with injured workers receiving \$527,698 in addition to compensation benefits. The cost relief provided is equivalent to the revenue generated by \$0.035 on the average assessment rate.

- The WHSCC conducted 241 fraud and abuse investigations, advancing the principles of detecting, preventing and deterring fraud and abuse. These investigations resulted in present and future claim cost savings in excess of \$1.25 million. Of these investigations, two possible cases of fraud were identified and recommended for prosecution to the Crown.
- The Planning and Policy Department worked with the board of directors to develop and publish the 2007-2012 Strategic Plan and Risk Assessment. This document states the WHSCC's Vision, Mission, Mandate, and Goals, which shape the WHSCC's strategic future and establishes measures so that stakeholders know we are achieving them.
- The Planning and Policy Department worked with the board on the following policies: Entitlement to Benefits; Benefit Payments; Occupational Health and Safety; and Medical Aid.

## Feature - Atlantic Benefits Comparison

The WHSCC's efficiency goal challenges the Commission to balance low assessment rates for employers with the best possible benefits to injured workers. For three consecutive years now, the average assessment rate for New Brunswick employers has decreased.

While decreasing the average assessment rates for employers, the WHSCC continues to provide a compensation package to our injured workers that exceeds those offered in other jurisdictions.

The WHSCC provides higher overall benefits for those who need them the most – the more severely injured workers.

While New Brunswick pays less benefits in the first week than Nova Scotia and Newfoundland and Labrador because of a three-

day waiting period, we pay more in subsequent weeks than all the other Atlantic provinces, with a maximum insurable level at \$53,200. The maximum insurable level for N.S. is \$46,700, \$48,425 in N.L., and \$44,700 in P.E.I.

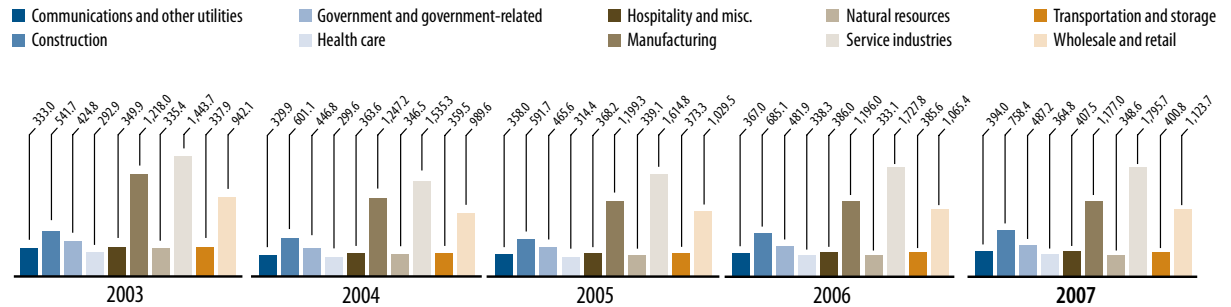
Compared to its Atlantic counterparts, New Brunswick offers the highest net pre-accident earnings, at 85%. (Newfoundland and Labrador offers 80% net; Nova Scotia offers 75% net, and 85% after 26 weeks; Prince Edward Island offers 80% net, with 85% after 38 weeks.)

Based on the 2006\* maximum insurable levels and the percentages of net, for example, after the waiting period an injured worker in New Brunswick received \$255.13 in benefits for the first week starting from the accident date, while a worker in

# Efficiency

## Statistics

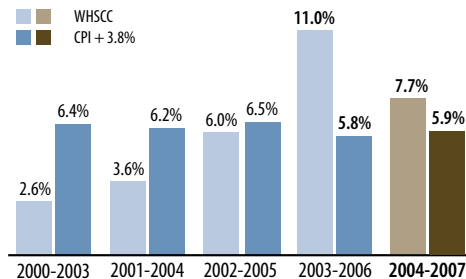
### Payrolls by Sector (in millions of dollars)



Note: Certain figures may have been restated to reflect new information.

### Performance Objective 1:

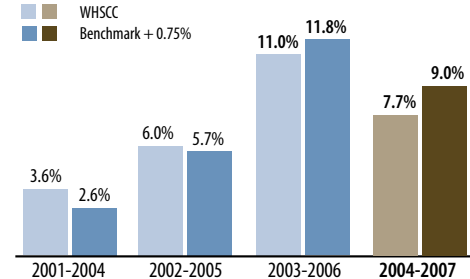
The investment portfolio's rate of return is to exceed the increase in the Consumer Price Index (CPI) + 3.8%, on a four-year moving average basis.



\*Before 2006, the objective was CPI + 4%.

### Performance Objective 2:

The investment portfolio's rate of return is to exceed the return generated by the investment policy defined benchmark portfolio by 0.75%, on a four-year moving average basis.



### Feature (continued)

N.S. received \$298.17, \$540.98 in N.L., and \$194.90 in P.E.I. However, the subsequent weekly benefit amount for a New Brunswick worker increased to \$637.83, compared to \$496.95 in N.S., \$540.98 in N.L., and \$487.26 in P.E.I. This translates to a total annual benefit of \$33,167.10 for an injured worker in New Brunswick, and \$28,130.96, \$27,365.38, and \$25,763.82 for workers in N.S., N.L. and P.E.I, respectively.

In addition to these loss of earning benefits, compensation packages may include:

- Medical treatment and health care expenses (prescription medication, assistive devices, etc.)
- Transportation allowances (transportation, accommodation, meals, etc. for claim-related travel expenses for treatment and medical appointments, etc.)
- Personal care allowances
- Long-term disability benefits

- Personal physical impairment award
- Benefits to dependants of fatally injured workers, including help toward funeral costs

In 2007, the WHSCC increased allowances for personal care, clothing and footwear, prescription eyeglasses, and burial expenses.

While the WHSCC is committed to preventing workers from getting injured in the first place, we continue to provide what we believe to be the best possible benefits to our clients, whose quality of life is paramount.

\*2006 was used for comparison, as 2007 data from N.L. and P.E.I was not available at time of publication.

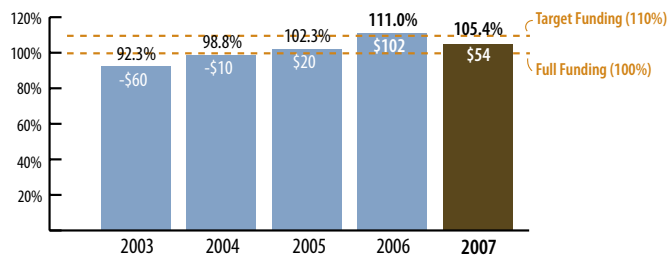
**Investment Returns by Asset Class**  
For the Year Ended December 31, 2007

	WHSCC	Benchmark index return	Benchmark index
Canadian Universe Bonds	3.7%	3.7%	DEX Universe Bond
Canadian Long Bonds	3.5%	3.4%	DEX Long Term Bond
Canadian Real Return Bonds	1.2%	1.2%	DEX Real Return Bond
Canadian Equities	9.0%	9.8%	S&P TSX Composite
U.S. Equities	-12.8%	-10.5%	S&P 500 (CS)
EAFE* Equities	-8.5%	-5.7%	MSCI EAFE* (CS)
Emerging Market Equities	13.6%	18.6%	MSCI EM (CS)

\*Europe, Australia and the Far East

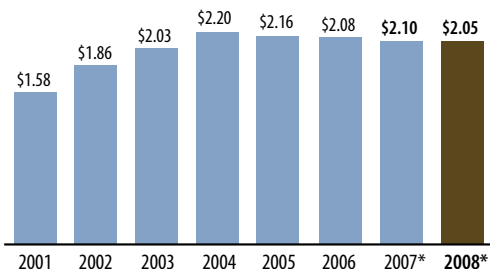
## Funding History

Percent funded and dollar amounts (in millions)



## Statistics (continued)

### New Brunswick Actual Average Assessment Rates



\*Provisional average assessment rate

### Canada Average Assessment Rates

In 2008 Ascending Order (obtained from AWCBC)

	Actual 2003	Actual 2004	Actual 2005	Actual 2006	Provisional 2007*	Provisional 2008**
Alberta	\$1.94	\$1.96	\$1.83	\$1.63	\$1.43	\$1.32
British Columbia	\$1.94	\$1.99	\$1.99	\$1.89	\$1.69	\$1.56
Manitoba	\$1.62	\$1.71	\$1.72	\$1.72	\$1.68	\$1.60
Saskatchewan	\$1.81	\$2.00	\$1.99	\$1.87	\$1.84	\$1.69
Northwest Territories & Nunavut	\$1.45	\$1.82	\$1.96	\$2.00	\$1.71	\$1.71
New Brunswick	\$2.03	\$2.20	\$2.16	\$2.08	\$2.10	\$2.05
Quebec <sup>1</sup>	\$1.93	\$2.15	\$2.29	\$2.32	\$2.24	\$2.14
Prince Edward Island	\$2.42	\$2.39	\$2.34	\$2.24	\$2.22	\$2.15
Ontario <sup>1</sup>	\$2.19	\$2.19	\$2.23	\$2.24	\$2.26	\$2.26
Nova Scotia	\$2.58	\$2.59	\$2.63	\$2.63	\$2.65	\$2.65
Newfoundland and Labrador	\$3.36	\$3.41	\$3.30	\$2.66	\$2.75	\$2.75
Yukon <sup>2</sup>	\$1.38	\$1.54	\$1.79	\$2.28	\$2.64	\$2.94

Note: Comparisons of average assessment rates can be very misleading and are influenced by the various methods adopted by WCBs for developing these averages. For example, weighting of individual rates by payroll or by industry can significantly impact the average rate. The mix of industry, the varying benefit levels and earnings ceilings, extent of industry coverage and degree of funding of liabilities can also result in distorted comparisons of average assessment rates by jurisdiction. Extreme caution should, therefore, be exercised in how average WCB assessment rates are used.

All rates, except for the two most recent years, are the actual average assessment rates for all jurisdictions except Ontario and Quebec. Ontario and Quebec rates for all years are provisional average assessment rates that are set at the beginning of each year.

\* Rates estimated except Quebec

\*\* 2008 estimated rates projected as of January 2008 except Quebec. In Quebec the rate represents the decreed rate set at the beginning of 2008.

<sup>1</sup> Provisional rates set at the beginning of each year.

<sup>2</sup> Rates for Yukon have been restated and are based on rate-assessed employers

Source: Association of Workers' Compensation Boards of Canada

Certain figures may have been restated to reflect more up-to-date information.

### Third Party Actions

For the Year Ended December 31, 2007

Cases under management*	Cases finalized	Legal fees on finalized cases**	Worker benefits paid	WHSCC recovery	Excess paid to workers	Employer cost relief***
75-90	40	\$440,594	\$2,789,331	\$2,706,591	\$527,698	\$2,706,591

\*Statistics represent actions that were settled during the period January 1, 2007 to December 31, 2007.

\*\*Legal fees for settled actions were paid over the life of the action and not solely in 2007.

\*\*\*The cost relief provided to employers is equivalent to the revenue generated by 0.035C on the average assessment rate.



**Goal:** Our employees will consider the Commission a good place to work

# Staff Satisfaction

## Measure

We will continue to maintain or exceed the high level of satisfaction, in excess of 80%, that our employees have come to expect.

In addition, other indicators that will be measured in support of the goal and compared to the most recent five-year average include:

- Absenteeism
- Internal promotions
- Health and safety
- Staff turnover

## Results

The employee satisfaction survey results indicate 87% of our employees find the WHSCC a “good place to work”. The response rate was 84%.

### Absenteeism

Employees were absent from work an average of 8.73 days. This is slightly higher than the five-year average of 8.21 days. The Human Resources Department, along with the directors and managers, will monitor attendance and help employees through the attendance management program. Despite the slightly higher absence rate, 14.2% of our employees were recognized for perfect attendance in 2007 and a significant number have this record for more than one year in a row. These include 10 employees for four years consecutive, eight for three consecutive years, and 10 for two consecutive years of perfect attendance.

### Internal promotions

In 2007, 104 competitions were opened and 17 of these were cancelled. The vacancy rate in unfilled positions was 11, lower than the five-year average of 13.19. Of the competitions opened and cancelled, 62 were for regular budgeted positions and resulted in 16 internal promotions, a slight decrease from the five-year average of 18.2.

### Health and Safety

The WHSCC completed another successful year with our Health and Safety Program. The number of accepted claims in 2007 was 11, which is lower than the five-year average of 14.6. Of the accepted claims, two were lost time totalling 58 days and costing just over \$14,000, the lowest cost since 2002. Our active incident and hazard reporting procedure supports a positive health and safety environment.

### Staff turnover

Twenty-four employees left the organization, including seven retirements. This represents a staff turnover rate of 5.55% and is consistent with the five-year average of 5.1%. The majority of those who left, went to work elsewhere, either as a promotion or to follow another career path. This is similar to 2006. With the current economic environment and private enterprise employment opportunities, recruiting and retaining employees is a challenge, and will be closely monitored in 2008.

## Stakeholder Profile

Our employees are valuable and, when they are absent from work, they and their contributions are missed,” says Dana Brown, WHSCC’s manager of labour relations and compensation. “This is the basis for our Disability Management Program.”

All studies confirm that getting employees back to work following an injury or illness is financially beneficial, Brown says, both for the worker and the employer. “But more importantly, there’s a bigger benefit, and that is the positive effects of a culture of a workplace that cares, one that shows that they’re willing to invest in that worker.”



*Dana Brown, WHSCC’s manager of Labour Relations and Compensation, discusses options with an employee.*

# Staff Satisfaction

## Highlights:

- Received International Personnel Management Agency (IPMA) – Canada Gold Agency Award for its significant contribution to the practice of human resources management.
- Budgeted \$745,790 for educational and professional development.
- The department sponsored 30 workshops, as well as six French language programs, with a total of 431 participants.
- Supervisors conducted performance reviews with 99% of the staff.
- Reviewed and revised 20 human resources-related directives or procedures.
- Reviewed and updated 72 job descriptions, which included identifying the appropriate job hazards and their controls. These were reviewed with the incumbents and posted to our Intranet site.
- The Wellness Program provided employees with a variety of activities in support of the four global objectives of physical, nutritional, psychological and basic health. Activities included: aquacise classes; fitness challenges; flu vaccination; and wellness lunch and learn sessions.
- The @LIVE program was launched. This program provides employees with clinical testing and a wellness assessment.
- Use of the Employee Assistance Program increased to 23.43%, which was higher than anticipated. The WHSCC supports an effective EAP for staff that require this intervention.
- The Disability Management Program helped 12 employees. Ten employees returned to work during the year through the Gradual Return to Work program, one employee remained on the job through workplace adjustments, and one employee was assisted to return to work in an alternate position.
- Our Health and Safety Program focused on continuous improvement within the health and safety process and program. Activities included: implementation of recommendations to reduce repetitive strain injuries; researching and updating our employee responsibilities within the health and safety program; implementing a code of practice for respirators; improving emergency response plans and WHMIS program; developing an organization tag and lock out procedure, and delivering a course on dealing with workplace violence.
- The annual staff meeting and recognition banquet was held honouring 82 employees and 11 retirees. Bill Carr's motivational presentation "OOPS I Love my Work", used humour to show employees how they can achieve performance and balance in their work-life.

## Stakeholder Profile (continued)

The WHSCC's Disability Management Program is not limited to staff who become ill or injured on the job. "Regardless of the injury or illness, and its cause, we are committed to helping our staff return to work," he said. "We want them to maintain their earning capacity, their employment skills and their self-esteem and dignity. It all goes toward our staff satisfaction goal that our employees will consider the Commission a good place to work."

While the WHSCC has always concentrated on helping other workers get back to work, it began focusing on its own internal program about six years ago. "Calling on our in house expertise-specialists in rehabilitation, prevention and claims, we developed a directive and formal Disability Management Plan and procedures to remove barriers and find creative ways to help our employees return to work."

Brown explains these barriers can include allergies, physical locations and RSIs (repetitive strain injuries). "For workers who

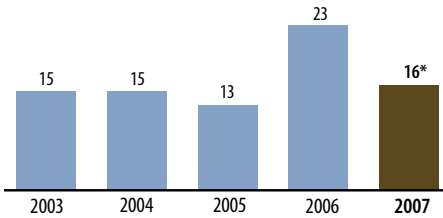
are capable of returning to work, we talk about and look at all options to help them come back. For example, job bundling is a reciprocal exchange of job duties. We would remove some of the tasks a sick or injured worker is no longer capable of doing, and give those to someone else, while the injured worker would assume other duties they'd be capable of performing from that same person."

The WHSCC's Disability Management Program is available to all staff absent from work for 10 days or more. At this point, the worker, the worker's manager, and Brown meet to discuss whether intervention may be beneficial. When intervention is considered, a case manager, union representative, physician or other medical personnel may be included in the program. Intervention includes: return to full-time work with time off for necessary medical appointments and treatments; a gradual return to work, with gradually increasing hours and an anticipated date of full return; return to regular duties, full time or gradual; and, a return to new or modified duties.

# Staff Satisfaction

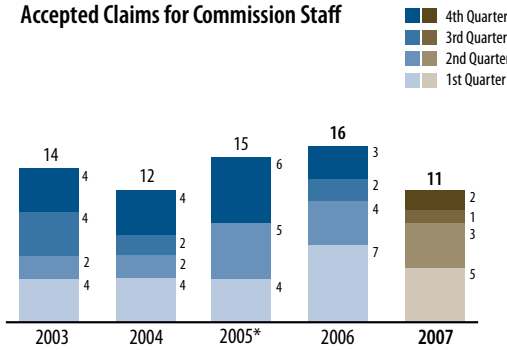
## Statistics

### Internal Promotions



\* January 1 to December 31 - Regular positions  
 - Numbers reflect promotions due to salary increases into or between bargaining and non-bargaining positions

### Accepted Claims for Commission Staff



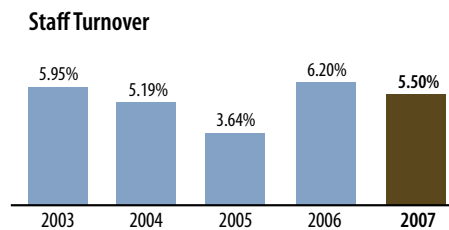
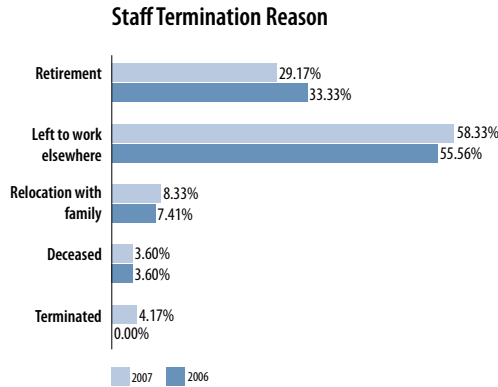
Note: The number of accepted claims reported in any quarter can change because accidents are not always adjudicated within the quarter they occur. Any claims accepted outside the quarter they occur in, will be noted in the next quarterly report.

\*There were 0 claims in the 4th quarter of 2005.

In 2007, through the WHSCC's Disability Management Program, 10 WHSCC employees returned to their regular work, one employee remained at work through accommodations, and another employee returned to work in an alternate position.

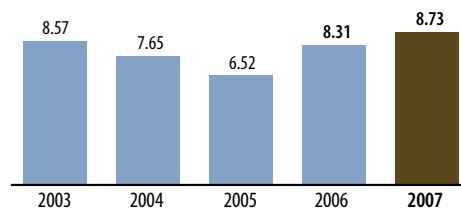
# Staff Satisfaction

## Statistics (continued)



### Absenteeism (days/person)

Absenteeism is equal to total days absent divided by actual yearly budgeted positions, minus vacant positions at the end of the year.



### Employment Milestones and Retirements.

In 2007, the WHSCC recognized 82 employees for their years of public service.

- Those with 5 Years of Government Services  
Anne Lise Albert, Lisa Bastarache, Kamini Bernard, Kathleen Bridges, Carol Caissie, Karen Christie, Dianna Clarke, Eleanor Cooper, Nadine B. Cormier, Yvette Costello, Marc Daigle, Elizabeth Doucet, Judy Farquharson, Trisha Fitzgerald, Réjean Gallant, Robyn Gardner Losier, Colleen Kinch, Robert Landry, Jacynthe Lanois, Murielle Lapierre, Lissa Lavigne, Caroline LeBlanc, Jacqueline LeBlanc, Sheila Liston, Tim MacFarlane, France Martin, Natasha Mazerolle, John Paquette, Crystal Peebles, Cathy Ramsay, Jeanne Richard, Tanya Richard, Phyllis Richard, Michel Soucy, Susan Walsh, Natalie Wheaton.
- Those with 10 Years of Government Services  
Scott Allaby, Greg Baker, Malcolm Burns, Michael Hallett, Doug Malcolm, Nola McGinn, Gino Thomas, Delcia Wentzell.
- Those with 15 Years of Government Services  
Monique Bergeron, John Brown, Katherine Cole, Line Connors, Joanne Coulombe, Linda Gillespie, Diane Green, Danielle Hey, Judith McGrattan, Archie Steeves, Richard Tingley.
- Those with 20 Years of Government Services  
Julie Barrette-Cairns, Diane Boudreau, Robert Cormier, Katherine Fitzgerald, Leslie Folie, Louise Godbout, James Gray, Beverly Humphrey, Gisele Lanteigne, Lee O'Blenis, John Robertson, Carmélia Savoie, Claude Savoie, Pauline Savoie, Sheila Springer.
- Those with 25 Years of Government Services  
Patrick Graham, Bandu Imbulgoda, Eileen Keating, Barbara Keir, Linda Matheson, Cynthia Phinney, Barry Roberts, Mary Tucker.
- Those with 30 Years of Government Services  
Valerie Edgett, Bruce Harquail, Welman Liston.
- Those with 40 Years of Government Services  
Omer Robichaud
- Those who retired during 2007  
Dr. John Boak, Pat Hay, Fred Hoyt, Gilles LeBlanc, Aldo Mallet, Carmélia Savoie, Mary Jayne Underhill.

**Goal:** The goal of the Appeals Tribunal is to deliver the highest quality services possible, and the fair and timely resolution of appeals.

# Appeals Tribunal

## Target for 2007:

To increase the number of appeals processed and to continue improving the processing time of decisions from hearing to the decision being mailed.

## Results

The Appeals Tribunal processed 16% more appeals in 2007 than in the previous year. The processing time from hearing to the decision being mailed was reduced by 10%.

The Appeals Tribunal, operating at arm's length from the WHSCC, offers employers and workers the opportunity to appeal Commission decisions. The Appeals Tribunal's primary responsibility is to provide fair, consistent and impartial decisions in a timely manner.

### The Appeals Tribunal consists of the following:

- **Chairperson:** reports to the board of directors on the administrative operation of the Appeals Tribunal. He also acts as a chairperson for appeal hearings.
- **Vice-chairpersons:** at the present time, there are six part-time vice-chairpersons who chair appeal hearings.
- **Appeals Panel members:** Appeals Panel members, representatives of workers or employers throughout the province, are appointed by the board of directors. Currently, there are 20 part-time members.
- In support Appeals Tribunal's activities, 13 staff members work to schedule hearings, prepare the necessary documentation and ensure decisions are sent to all concerned parties.

### Achieving fair, consistent, impartial and timely completion of appeals requires:

- Well-trained vice-chairpersons, panel members and staff
- A consistent approach to deciding appeals
- Supportive legislation and policies

### The Appeals Tribunal offers the following service:

Workers, dependants, and employers can appeal WHSCC decisions. As an administrative tribunal, the Appeals Tribunal is a quasi-judicial body that follows the rules of Natural Justice in its decision-making.

### Appeals Panel hearings

An Appeals Panel will consider an appeal at an Appeals Panel hearing. The Appeals Tribunal holds its hearings in regions throughout the province in the official language chosen by the person submitting the appeal. Appeals Panel decisions are final and delivered in writing. The Appeals Panel consists of a three-person panel or a single-person panel.

### Three-Person Panel

A Three-Person Panel is made up of a chairperson and two panel members. The chairperson is chosen from the Appeals Tribunal's list of individuals appointed for that purpose. The two remaining panel members consist of a worker representative and an employer representative, also chosen from pre-established lists. Panel members are required to act impartially, and as such, do not represent any particular group.

“A fundamental change must be made in the way appeals are processed and heard, given the problems being experienced over the last two to three years. The change must focus on giving the Appeals Tribunal the ability to deal with appeals in a short time period, while respecting the rules relative to procedural fairness. The change will also need to include the way advocates carry out their function and the way the Commission documents its decisions.”

– Paul M. LeBreton, Chairperson of the Appeals Tribunal



# Appeals Tribunal

## Single-Person Panel

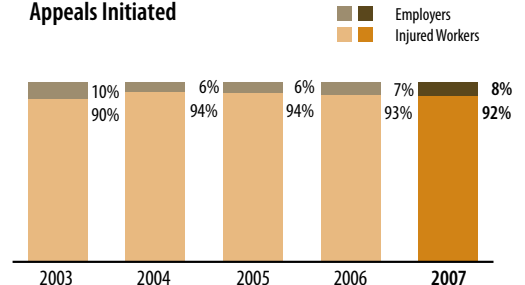
A Single-Person Panel is subject to the consent of all parties and consists of a chairperson acting alone.

## Highlights:

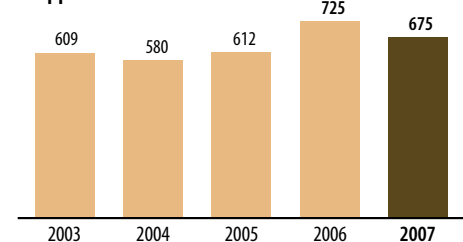
- The amount of appeals received decreased by 7% from 2006, when we had an increase of 18.5%.
- The amount of appeals processed and resolved increased by 16% from 2006.
- The overall processing time from the hearing to the decision being mailed was further reduced by 10% from 2006, when it had been reduced by 11%.
- The amount of postponed appeals decreased by 8.5% over last year. This area was a concern as postponed appeals remain in the Appeals Tribunal's inventory of appeals to be scheduled. Due to an increase in 2005, postponed appeals have been monitored since 2006 to determine if a trend was developing and to take appropriate measures. One step that was taken and continued is to withdraw an appeal in lieu of postponing when it is determined that the appeal is not ready to proceed. This happens most often when the party requesting the appeal is looking for additional information to be added to the Appeal Record. As this may take some time and the information has to be reviewed by the original decision-maker, these files are withdrawn from the active list of appeals while the process runs its course.
- Appeals withdrawn before the hearing have increased by 30%. Although some of this can be attributed to appeals being withdrawn in lieu of postponing, there are other reasons for this increase. On several occasions, appellants will submit an appeal application before seeking assistance with the workers' or employers' advocates. After seeking assistance, these appeals are sometimes withdrawn to allow the representative time to review the file and to obtain additional information to be sent to the Commission for review.
- In November 2007, Appeals Tribunal vice-chairpersons were invited to a decision-writing course organized by the Labour and Employment Board.

## Statistics

Appeals Initiated

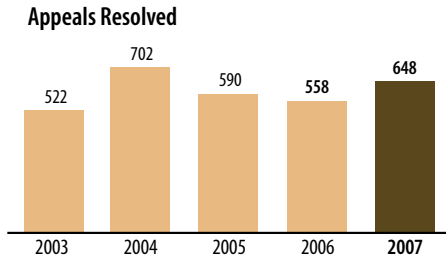


Appeals Received



# Appeals Tribunal

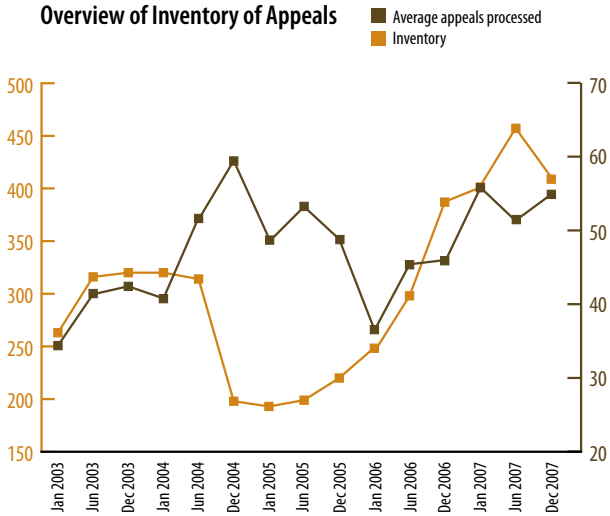
## Statistics (continued)



### Appeals Results

	2003	2004	2005	2006	2007
Accepted	50%	59%	62%	68%	67%
Partial	13%	6%	7%	3%	5%
Denied	34%	33%	30%	28%	25%
Withdrawn	3%	2%	1%	1%	3%

### Overview of Inventory of Appeals



# WHSCC Contact Information

## Contact **Toll-Free Number**

1 800 222-9775

### **Offices**

#### **Saint John**

*Mailing address for all WHSCC Offices:*

1 Portland Street  
P.O. Box 160  
Saint John, NB E2L 3X9

#### **Head Office**

#### **Assessment Services**

#### **Claims Inquiry**

#### **Appeals Tribunal**

Phone: 506 632-2200  
Toll-free: 1 800 222-9775  
Toll-free fax for claims:  
1 888 629-4722  
Appeals fax: 506 633-3989

#### **Dieppe**

30 Englehart Street, Suite F  
Phone: 506 867-0525  
Fax: 506 859-6911  
Toll-free: 1 800 222-9775

#### **Bathurst**

Place Bathurst Mall  
1300 St. Peter Avenue, Suite 220  
Phone: 506 547-7300  
Fax: 506 547-7311 or 506 547-2982  
Toll-free: 1 800 222-9775

#### **Grand Falls**

166 Broadway Blvd., Suite 300  
Phone: 506 475-2550  
Fax: 506 475-2568  
Toll-free: 1 800 222-9775

### **E-Mail Addresses**

Appeals Tribunal: [appeals@whscc.nb.ca](mailto:appeals@whscc.nb.ca)  
Communications: [communications@whscc.nb.ca](mailto:communications@whscc.nb.ca)  
Webmaster: [webmaster@whscc.nb.ca](mailto:webmaster@whscc.nb.ca)

[www.whscc.nb.ca](http://www.whscc.nb.ca)