

June 30, 2016
OFFICE OF THE WORKER ADVISER
Annual Report
April 1, 2015 to March 31, 2016

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A MESSAGE FROM THE DIRECTOR

I am pleased to report on the accomplishments of the Office of the Worker Adviser (OWA) for fiscal year 2015-2016. With 95 staff in 16 offices across Ontario, OWA is an important resource for vulnerable non-unionized workers in dealing with their WSIB claims or possible reprisals for exercising their health and safety rights. Below, I briefly highlight our workplace insurance services and then review our fourth year of services around reprisals.

OWA carries out its mandate as a partner in Ontario's workplace insurance system, along with the Workplace Safety and Insurance Board (WSIB), Workplace Safety and Insurance Appeals Tribunal (WSIAT) and Office of the Employer Adviser (OEA). We are also now a partner in Ontario's health and safety system. We are committed to helping both of these systems work for all the workers and employers that they serve.

Workplace insurance services

2015-2016 was a year of transition for OWA to a new service delivery model. The new model responded to changes in the OWA's operating environment and streamlined our services by reducing the initial service process from two stages to one; as well as providing more comprehensive advice and referrals to workers, including those whose cases lack sufficient evidence for OWA to bring forward into the appeals system.

OWA responded to 11,082 new initial requests for service during 2015-2016, a decline of about 16% from the previous fiscal year. This continued the trend in 2013-2014 and 2014-2015, when service demand moderated following several years of higher levels. However, the number of requests for case reviews from workers increased by 2% to 2,421, meaning that a higher proportion of those workers contacting OWA needed help with representation. We maintained the increase in percentage of new cases accepted for representation from the low of 52% in 2012-2013 to 60% in 2015-2016. We made progress reducing our case inventory at the Workplace Safety and Insurance Appeals Tribunal (WSIAT) from historically high levels which had affected our capacity for efficient case turnover. At the same time, we eliminated a significant internal case inventory that had built up as of the end of 2014-2015. A transitional inventory increase developed in newer cases, but its growth moderated in the fourth quarter, with projected stabilization and reduction in 2016-2017. Finally, our overall success rate in representation services at WSIB and WSIAT increased significantly, from 39% in 2014-2015 to 45% in 2015-2016.

During 2015-2016, OWA was involved in some of the most complex cases in the system, including major clusters of occupational diseases and Charter of Rights matters. This annual report also highlights a number of positive WSIAT decisions obtained by worker advisers. We continued to strengthen our protocols with WSIB and WSIAT in responding to the situations of injured workers in psychological and financial crisis.

OWA was involved in proactive partnerships to deal with the workplace insurance system's challenges. We collaborated with WSIAT in reviewing our case inventory and addressing opportunities to reduce it. We partnered with employer representatives to develop consensus proposals on potential improvements to the appeals process and alternative dispute resolution.

Health and safety reprisal services

Starting on April 1, 2012, amendments to the Occupational Health and Safety Act (OHSA), gave OWA the mandate to serve non-unionized workers who may have suffered reprisal by their employers for exercising their OHSA rights. 2015-2016 was the fourth year for this mandate.

The program workload has matured and stabilized after an initial two years of significant growth. Without any significant outreach or publicity, this year we had over 900 requests for service. This showed the continuing importance of OWA's reprisals mandate to vulnerable non-union workers in Ontario.

Thank you!

This was a significant year of transition for OWA. I wish to thank all those who contributed to development and implementation of our new service delivery model in 2015-2016, beginning with the joint staff/management team which developed the proposed approach and all those who worked on implementation. Thank you as well to our workplace insurance program staff, who cleared out the significant inventory of cases that faced us at the beginning of the year and continued to show dedication to serving vulnerable workers. And to the staff of our Reprisals Program, who helped over 900 workers in the fourth year of this service; and our legal, administrative and management team.

I also want to acknowledge the support of the Ministry of Labour, which facilitated inter-agency partnerships; and our many friends and colleagues at WSIB, WSIAT, and OEA, with whom OWA worked on solving problems and serving the public. I want to thank our partners in the worker community, with whom we collaborated closely in dealing with another year of major change. And also the many employer representatives with whom we worked on resolving cases as well as on strategic issues such as improvements in dispute resolution. Finally, I would like to recognize and thank the thousands of vulnerable workers and surviving family members who entrusted their cases to us – we tried our best to serve every single worker with dedication and care; and we learned much from those workers as well.

Alec Farquhar
Director

THE MANDATE OF THE OFFICE OF THE WORKER ADVISER

The OWA has two mandate areas:

- Section 176(1) of the Workplace Safety and Insurance Act (WSIA): to educate, advise and represent non-union workers and their survivors regarding workplace insurance claims and appeals.
- Section 50.1(1) of the Occupational Health and Safety Act (OHSA): to educate, advise and represent non-union workers who have complaints under the Occupational Health and Safety Act (OHSA) that their employer may have engaged in a reprisal against them for exercising their rights under the OHSA.

The OWA's vision is to:

- be a leader in advice, representation, and education in workplace safety and insurance matters, on behalf of the most vulnerable injured workers and their survivors;
- provide expert and effective advice, representation and education to vulnerable, non-unionized workers who may have suffered reprisal for asserting their rights under the Occupational Health and Safety Act;
- provide a vital public service that contributes to the effective functioning of Ontario's workplace safety and insurance and health and safety systems, and support a healthy workforce as a foundation for a strong, vibrant provincial economy; and,
- contribute to improving workplace safety and insurance and health and safety through community and system partnerships.

The OWA is an operational agency of the Ministry of Labour (MOL). OWA staff are public servants. The director of the OWA is an Order-in-Council appointee.

OWA SERVICE DELIVERY

Workplace insurance related services are provided from 16 offices in four regions:



Toronto East Region: Downtown Toronto, Scarborough and Ottawa

Central Region: Downsview, Mississauga, Hamilton and St. Catharines

Southwest Region: London, Waterloo, Windsor and a satellite office in Sarnia

North Region: Sudbury, Elliot Lake, Sault Ste. Marie, Timmins and Thunder Bay

In addition to these office locations, OWA offers clinics in a number of other communities across the province where injured workers can meet in person with worker advisers without having to travel long distances. These communities include: Barrie, Brantford, Kingston, North Bay, Oshawa, Peterborough and St. Thomas. In 2015-2016, 4 clinics were held in the city of North Bay.

OWA's Central Client Services Unit (CCSU) provides the following services, primarily in relation to the OWA's workplace insurance mandate:

- advice and representation services for OWA clients in legally complex and/or precedent setting cases
- internal legal advice and assistance to OWA managers and staff, including support around fulfilling professional responsibilities to OWA clients
- system improvement initiatives and policy submissions
- development of educational sessions and resources for OWA staff and other worker representatives
- development of educational materials for the public.

Occupational health and safety reprisal complaint services are provided by the OWA Occupational Health and Safety Reprisal Program (OHSRP) from the OWA's provincial office in Toronto. Most OLRB mediations and hearings are held in Toronto. Some mediations are held in regional centres. In 2015-2016, worker representatives traveled to London, Ottawa, Sudbury, Timmins and Thunder Bay to represent workers.

REPORT ON THE OWA'S WORKPLACE SAFETY AND INSURANCE MANDATE

The following section of this report relates to services provided under the OWA's workplace insurance mandate. Services provided under the OWA's occupational health and safety Reprisals mandate are reported separately later in this report.

Overview of Services

Under its workplace insurance mandate, the OWA focuses on the following services to non-union injured workers and their survivors:

- information and advice
- educational services
- representation in dispute resolution and appeals

In addition to serving individual clients, the OWA also seeks to work with system and community partners to help ensure that the system is responsive to the needs of injured workers and survivors.

INFORMATION AND ADVICE

Some workers contact the OWA with a question about workplace insurance or for information to help them understand their entitlements. Other workers contact us because they have been denied benefits or services by WSIB and they want to appeal a decision. The OWA provides assistance in both situations: in the first, by providing information and "summary advice" (advisory services) and in the second by representing the worker in the dispute resolution and appeal process (representation services). During 2015-2016, OWA responded to 11,082 new requests for service.

OWA Website - <http://www.owa.gov.on.ca>

In addition to directly responding by phone or in person to questions workers may have about their workplace insurance claims, the OWA also promotes its website as a source of information to clients.

Highlights of the website include:

- pages on specific workplace insurance related topics;

- an appeals overview page features visuals and text outlining the key agencies in the system, the WSIB vs. the WSIAT;
- a webpage with the forms necessary to meet appeal time limits and to initiate an appeal;
- “frequently asked questions” about the OWA, workplace insurance, and health and safety reprisals; and
- information sheets in 21 languages providing an overview of OWA's services.

A featured Spotlight section also gives the OWA space to highlight important news and events.

EDUCATIONAL SERVICES

Injured Workers and the General Public

The OWA provides educational services to injured workers and the general public through information sessions held in communities across the province. During 2015-2016, the OWA held 16 information sessions for MPPs' staff, 10 information or educational sessions for the public, and 4 clinics for injured workers in communities across the province.

The OWA also provides general information through its website as described earlier in this report.

Community and System Partners

The OWA provides educational services at a more advanced level to community and system partners. OWA staff are also invited to present at continuing legal education sessions on workplace insurance topics. In 2015-2016, these services included the following:

- June 2015 - presentation by OWA Director to the University of Waterloo Ergonomics Research Day on the history of MSD Prevention in Ontario
- July 2015 – presentation by OWA Director to graduate program at Ontario Institute for Studies in Education on occupational disease compensation and prevention
- October 2015 & January 2016 - an OWA Legislative Interpretation Specialist presented a webinar for worker representatives on case strategies under the November 2014 WSIB benefits policies
- October 2015 - OWA hosted a webinar on strategies for success at WSIAT with Gary Newhouse, a lawyer specializing in workplace insurance/workers' compensation
- October 2015 – the OWA Director presented to the Windsor and District Occupational Health and Safety Conference on key themes and issues for future attention
- November 2015 – presentations to the Unifor workers' compensation conference on benefits policies by the OWA Director and on entitlement for psychological disabilities, chronic pain and occupational stress by two Worker Advisers
- November 2015 – presentation by OWA Director on asbestos disease and efforts to ban asbestos, to the Occupational Cancer Research Centre Symposium on the burden of occupational cancer
- February 2016 - OWA hosted a second webinar on WSIAT strategies, presented by two Worker Advisers

HIGHLIGHTS OF OWA REPRESENTATION SERVICES

Statistics on OWA representation services are provided later in this report, along with summaries of important WSIAT decisions obtained by OWA representation. Our representation caseload at the end of 2015-2016 was 3,232 as noted in Figure 1. This accounts for the total number of representation files open as of March 31, 2016. However, the number of workers requesting representation services found in Table 1 (2,421) is the number of new workers in 2015/16 who requested a case review for possible opening for representation services.

This section provides highlights of some of OWA's more complex cases and case clusters.

Occupational Disease

During 2015-2016, the OWA continued to represent in a number of occupational disease clusters and individual cases in various parts of the province. This included Peterborough factory workers; Sarnia foundry, petrochemical, construction and factory workers; Elliot Lake uranium miners and Kitchener-Waterloo rubber workers. The claims arising from these clusters were at various stages of adjudication, from initial evidence gathering up to WSIAT. Taken as a whole, OWA involvement in occupational disease cases is one of its most vital roles, helping hundreds of occupational disease victims and in many cases their survivors.

Sarnia Occupational Disease Cluster

The OWA continued its work representing at WSIAT in the lead case of a cluster of occupational disease cases, including a number of lung cancers, arising from a closed factory in Sarnia. In 2015-2016, WSIAT released a first interim decision on exposures in the lead case of the cluster (*Decision No. 95/09A*). This decision made findings about the exposures at the Sarnia facility and will be used as a foundation for future appeals at WSIAT. In follow-up to that decision, the OWA prepared updated submissions regarding the work history and exposures of the lead case worker. In 2016-2017, we expect WSIAT to release a further interim decision with findings about the lead case worker's exposures. We hope this will allow us to move into the second (causation) phase of the lead case.

Peterborough Occupational Disease Cluster

In 2015-2016, the OWA continued to work with UNIFOR, the Occupational Health Clinics for Ontario Workers (OHCOW), WSIB and members of the Peterborough Occupational & Environmental Health Coalition, to move forward a cluster of cases from a Peterborough factory. These cases are factually complex, often involving many years of multiple exposures. In order to evaluate and prepare these cases for appeal, careful case reviews and thorough analysis of the medical documentation are required. During 2015-2016, OWA had 33 of these cases and UNIFOR had 31.

Rubber Workers – Kitchener/Waterloo:

As a result of an intake clinic organized by the USW union in 2002 for rubber workers in the Kitchener-Waterloo area, approximately 400 WSIB claims were initiated. Many were cancer claims. Some were allowed at the operating level of WSIB. Another clinic was held in 2005, with an additional 200 claims initiated. The primary exposures were asbestos, polycyclic aromatic hydrocarbons, aromatic amines and nitrosamines.

At the end of 2015-2016, the OWA was representing 26 Rubber Workers and their families for entitlement to various cancers as a result of occupational exposures. The majority of the claims were for gastro-intestinal cancers (colon, rectal, stomach, esophageal), several for bladder and lung cancer. There was also Non-Hodgkins Lymphoma, Chronic Obstructive Pulmonary Disease and kidney disease. In addition, 28 cases have been closed. Five claimants had their cases allowed at the operating level. Another four claimants received WSIAT decisions, three allowed and one denied. On the remaining cases, OWA has requested assistance from OHCOW, including hygiene reports and medical assessments.

Mental Stress

In 2015-2016, the OWA continued to represent clients in mental stress cases that have led to challenges to subsections 13(4) and (5) of the *WSIA* under the *Canadian Charter of Rights and Freedoms*. These are provisions that exclude workers with chronic mental stress from entitlement under the Act. The OWA continued its participation as an intervenor in one appeal and made the Charter arguments in that case. The decision was pending at year end.

Time limit extension case at WSIAT

Appeal time limits are an area of significant concern for the worker community. OWA has devoted significant resources to representation at various levels of the system to obtain extension of time limits to allow the merits of injured workers' claims to be considered by WSIB or WSIAT. In 2015-2016, OWA took on representation in an important WSIAT time limit extension appeal. The worker's previous representative had missed the time limit and then argued for an extension of time, which was denied in *Decision No. 1173/15E*. OWA prepared extension submissions, including affidavit evidence, arguing for the decision to be reconsidered. At year end, the decision had not yet been assigned to a WSIAT Vice Chair.

Emerging occupational disease clusters

During 2015-2016, OWA was involved in planning discussions about two emerging occupational disease clusters:

- **Possible neurological conditions from aluminum prophylaxis.** From the 1940s to the 1970s, thousands of hard rock miners in Ontario were required to breathe aluminum dust prior to each daily shift. It was believed at the time that the dust was protective from the health impacts of silica. Concern has been growing through the years that this extensive aluminum exposure may have led to neurological consequences. During 2015-2016, OWA worked with a community based initiative, the USW union and OHCOW in preparation for clinics for exposed workers in Timmins scheduled for May 2016 and in Sudbury for October 2016.
- **Agent Orange.** Various formulations of herbicides were used in Ontario for several decades primarily to suppress plant growth in northern Ontario. They have been popularly termed "Agent Orange". Hundreds of the exposed workers have filed WSIB claims for a wide range of health conditions. During 2015-2016, OWA partnered with the Power Workers Union and OPSEU around Agent Orange strategy.

SYSTEM AND COMMUNITY PARTNERSHIPS

OWA places a high priority on partnerships, both within the workplace insurance system and in the community. Across the province, OWA works actively with many local partners, to ensure good service and referrals. This includes local WSIB offices, Members of Provincial Parliament, health care providers and social service agencies. OWA also works at the provincial level. Highlights of provincial partnerships are reported below.

WSIB Labour and Injured Worker Advisory Committee (LIWAC)

The OWA director and General Counsel sit on this committee, which is convened by the Chair of the WSIB and is comprised of senior management from the WSIB and worker members from unions, injured worker groups, legal clinics and the OWA. Through this committee, worker members provide feedback and input on high level initiatives of the WSIB, including policy and system change consultations. Highlights in 2015-2016 included discussions of the WSIB appeals process, experience rating and input to WSIB's strategic planning process.

Fatalities and Immediate Response (FAIR) Partnership

FAIR is a partnership with WSIB, MOL, and Threads of Life (an organization of families affected by workplace fatalities) to ensure coordinated services and support to workers and their families following traumatic workplace fatalities and catastrophic workplace injuries resulting in severe permanent impairment.

Workers in Crisis and Critical Need

In 2015-2016, OWA continued our system partnership with WSIB and WSIAT to ensure that identified cases are considered for prioritization in the appeal system. These cases are defined as: demonstrating significant financial hardship, homeless, in imminent likelihood of death, posing a suicide threat, or having a severe mental health issue. Together we have ensured that any possible gaps in services are dealt with on a priority basis. The partners dealt with several serious cases in 2015-2016.

Support to OWA Clients with Asbestos Cancers

OWA over the years has represented hundreds of workers and surviving family members in asbestos disease cases, including mesothelioma, lung cancer and asbestosis. Ontario is now at the crest of a wave of asbestos cancers stemming from exposures up to the 1980s, with around 150 new mesothelioma cases and 350 new lung cancers annually. There is an urgent need for early detection and treatment, as well as prevention of any new exposures. In 2015-2016, OWA worked with a group of construction employers and unions, in partnership with the Canadian Mesothelioma Foundation, on efforts to secure stable funding for research, early detection and treatment for OWA clients and other workers contracting mesothelioma, as well as for a national mesothelioma health care network.

Partnerships around appeals and dispute resolution

2015-2016 was another year of significant challenge in the workplace dispute resolution and appeals system. As of April 2015, OWA had over 1600 of its 3500 representation files at WSIAT, around 950 more than the ideal level of 650. This greatly affected our ability to process cases efficiently and take new cases. In response, in 2015-2016, OWA collaborated with WSIAT to address this situation,

resulting in a stabilization and modest reduction in case inventory by fiscal year-end to around 1570 cases.

OWA also continued to place a high priority on the need to work collaboratively with employers on improving dispute resolution at WSIB, and to avoid having cases go to the WSIAT level. Promising progress was made by a joint employer/worker dispute resolution advisory group through the Ontario Bar Association, which the OWA Director co-chaired with a prominent employer lawyer. The group worked on a consensus-based joint submission to the WSIB. At year end, the submission was close to finalization, with the objective of presenting it to WSIB in 2016-2017.

Partnerships around improving employment for injured workers

Many of OWA's clients have some residual capacity to work, following their occupational injury or illness. However, there are many challenges to helping them re-enter the labour market. During 2015-2016, OWA was active in several initiatives to improve employment levels for persons with disabilities. Most important was a national policy roundtable and symposium in November 2015, organized by the Centre for Research on Work Disability Policy (CRWDP), bringing together federal and provincial policy people and stakeholders to discuss ways to improve disability program coordination. The OWA Director, a member of the CRWDP Executive, presented to the symposium on potential directions to improve coordination of services and supports for injured workers.

CORPORATE OWA INITIATIVES

New OWA Service Delivery Model

In 2015-2016, OWA focused extensive resources on implementing major changes to its service delivery model, based on recommendations developed by a joint management/staff working group in 2013-2014 and 2014-2015.

The new service model responded to a changing operational environment and strengthened the OWA's capacity to meet clients' needs in a timely way. This included:

- elimination of duplication of reviews of injured workers' WSIB claim files and
- provision of comprehensive case reviews to help workers understand the strength and challenges in their cases.

The new service model also provided OWA staff the time and resources to meet professional responsibilities, especially appeal time limits, which is necessary in an increasingly regulated environment.

Implementing the recommendations required new work processes, procedures and other supports for staff and management to make the transition. A series of webinars were held for OWA staff on each of the five new procedures for training purposes. Extensive training was provided on effective referrals for injured workers who might need additional support or services.

Transitional processes allowed the OWA to clear out the inventory of cases awaiting review and representation services as of March 31, 2015, some of whom had waited up to two years. In January

2016, when this clear out was complete, the OWA began to contact new clients to offer reviews of their claim files.

Service Excellence, staff learning initiatives and wellness

During 2015-2016, OWA moved forward with several initiatives to ensure service excellence and support staff wellbeing.

Learning programs for OWA Staff

As part of its commitment to continuing professional development, the OWA delivers extensive educational programs to its own staff. During fiscal 2015-2016, this included the following delivered by CCSU:

- **Conflict of Interest Training** for worker advisers which covered what a conflict of interest is and why it matters, the different types of conflicts, conflict-checking systems, the importance of maintaining confidentiality of information of former clients and conflict screening measures. Participants were provided with practical examples of different types of conflicts of interest that could occur in their everyday casework. OWA applied for and received accreditation from the Law Society for 1.5 professional hours for this course, which was delivered in August and September 2015.
- **“New Benefits Policies: Overview and Strategies”** was delivered in the summer and fall of 2015. The webinar offered strategies for arguing cases involving apportionment of Non-Economic Loss awards and premature termination of Loss of Earnings benefits.

Workplace Violence Prevention and Peer Support

OWA Staff deal with vulnerable workers who sometimes experience crisis situations – often from a combination of financial, health and psychological factors. In extreme cases, workers may pose a threat of harm to themselves and/or others. OWA has long recognized the importance of supporting these workers but also when appropriate, protecting them, OWA staff and other system partners from potential harm.

During 2015-2016, OWA also participated actively in the MOL’s Peer Support Program, an initiative to provide peer to peer emotional support and resources in times of personal crisis. Two additional OWA staff participated in Peer Support, expanding this support for both bargaining unit staff and for management.

STATISTICAL REPORTING

2015-2016 was a year of transition for OWA to a new service delivery model. The new model responded to changes in the OWA’s operating environment and streamlined our services by reducing the initial service process from two stages to one; as well as providing more comprehensive advice and referrals to workers, including those whose cases lack sufficient evidence for OWA to bring forward into the appeals system.

Summary of OWA's achievements in 2015-2016

During the 2015-2016 fiscal year, OWA was successful in assisting a very substantial number of workers with their workplace insurance claims and appeals:

- OWA responded to 11,082 new requests for service. This was 16% below 2014-2015 levels in line with reductions over the past two years from the higher levels of previous years;
- OWA completed 871 case reviews for workers who had requested representation service, 63% less than in 2014-2015, mainly as a result of the transition to a new service delivery model and the processing of the significant case inventory which had developed by year end in 2014-2015;
- At the completion of case reviews, the percentage of workers who received offers of representation increased by 3% from 2014-2015 to 60% overall. This was well received by those seeking OWA services and within the worker community;
- The overall success rate in representation services in 2015-16 at WSIB and WSIAT was 45%. This represented a significant increase from the 2014-2015 level of 39%;
- Total case inventory increased from 4205 in 2014-2015 to 5440 in 2015-2016, a 29% increase. This reflected primarily the transition to a new service delivery model. As of March 31, 2016, the growth in case inventory had moderated significantly and OWA was projecting stabilization and reduction for 2016-2017.

Client Satisfaction Levels

The OWA takes pride in the quality of service it provides to clients. In order to identify and address any deficiencies, clients are asked to complete satisfaction surveys at the conclusion of OWA's representation service to them. Of the 186 individuals who responded to the survey in 2015-2016, 95.7% were "very satisfied" or "satisfied" with the service they received. Some specific comments from OWA clients are provided in Appendix C to this report.

Advisory Services and Case Review

Table 1 shows the number of new requests for service involving both summary advice and requests for representation services during the past five years.

The OWA had 11,082 new requests for service, during the 2015-2016 fiscal year, 16% less than the 13,164 in 2014-2015. This likely reflected the continuing decline of new claims to the WSIB, working their way through the system. 2,421 workers requested representation services. This was a 2% increase from 2014-2015. This showed that although fewer overall requests for service were made to OWA in 2015-2016, a higher proportion of those workers needed help with representation.

In 2015-2016, the OWA completed 871 case reviews, compared to 2,386 in 2014-2015, a decline of 63%. This decline resulted from OWA's focus in 2015-2016 on implementing its new service delivery model and on processing the large case inventory as of March 31, 2015, some of which had experienced delays of up to two years. This meant that new workers requesting case reviews beginning April 1, 2015 had to wait until that inventory had been dealt with. To mitigate this, OWA offered immediate case reviews in 2015-2016 to 127 workers whose situations met the criteria for case prioritization.

Table 1: New Requests for Service and Case Reviews

	11-12	12-13	13-14	14-15	15-16	Change from 14-15 to 15-16
Number of New Requests for Service*	18,081	17,105	13,881	13,164	11,082	-16%
Number of New Requests Resolved with Summary Advice	14,599	13,771	11,150	10,510	6,276	-40%
Number of Requests for Representation***	3,124	3,114	2,523	2,382	2,421	+2%
Number of Cases Reviewed for Representation	3,048	3,179	2,473	2,386	871	-63%
Number of Cases Selected for Representation**	1,809	1,658	1,471	1,479	526	-64%
Number of Cases Declined Representation	1,239	1,521	1,002	1,025	345	-66%
% of Cases Reviewed which are offered Representation	59%	52%	59%	62%	60%	-2%

*Note that the sum of "Number of New Requests Resolved with Summary Advice" and "Number of Cases Reviewed for Representation" does not total the "Number of New Requests for Service." This is because the "Number of Cases Reviewed for Representation" includes only those reviews completed during the fiscal year, and not reviews initiated, but still in progress, as of March 31.

** Note that the number of cases selected for representation does not match the number of representation files opened. This is because some files go on a waiting list prior to opening.

*** It should be noted that the representation caseload figure found in Figure 1 (3,232) is the number of representation files open as of March 31, 2016. However, the number of workers requesting representation services found in Table 1 (2,421) is the number of new workers in 2015/16 who requested a case review for possible opening for representation services.

Representation Services

Case Review

When clients contact the OWA because they have received a WSIB decision that they want to appeal, the file is assigned to a worker adviser for a case review. The purpose of this review is to determine if there is sufficient evidence to support an appeal.

The OWA offers representation services in cases where:

- the entitlement issue is valued at more than the equivalent of four weeks of wage loss benefits;
- the issue(s) are complex enough to require the assistance of a skilled and knowledgeable representative; and
- it is likely that sufficient evidence is available to support a reasonable chance of success in the appeal process. This does not mean that the case is guaranteed to succeed – but it does mean that a worker adviser must find enough evidence and/or legal grounds to justify an appeal.

The OWA does not represent in cases with straight forward, single issue appeals involving a non-economic loss (NEL) increase, commutation of a pension, or an employer's request for Second Injury Enhancement Fund (SIEF) relief, although we do provide information and support to workers who wish to represent themselves. The OWA will also not represent in cases where the only issue is a challenge of a WSIB security restriction decision.

The proportion of cases reviewed which were accepted for representation increased by 3% from the 2014-2015 level, to 60%. This was welcomed by worker community representatives, who had been concerned about what they saw as an overly restrictive approach by OWA to determining merit in worker appeals.

Representation Files

If the OWA, at the conclusion of the case review, determines that the case meets the criteria for service, an offer of representation is made.

Following a surge of new requests for representation beginning in 2011-2012, OWA experienced a steady increase in the number of its representation cases which were at the WSIAT level. By the beginning of 2015-2016, around 1600 cases were at WSIAT versus the ideal level of around 650. This mirrored the growth of WSIAT's overall case inventory, which resulted in increases in the time needed to resolve appeals at that level. As a response, OWA maintained a relatively high full representation caseload, in the 3600 – 3700 range, so that work on some cases could proceed while a significant number of others waited at WSIAT. By 2014-2015, it was clear that these higher caseloads were becoming increasingly difficult to manage. Delays in case reviews and assignment for representation were increasing. There was also an impact from staff turnover as around one third of OWA's worker advisers retired from 2012-2013 to 2014-2015. So during 2015-2016, efforts were made to reduce the overall representation caseload, resulting in a more sustainable level of 3232 by year end.

Transition to a new service delivery model – impact on total case inventory

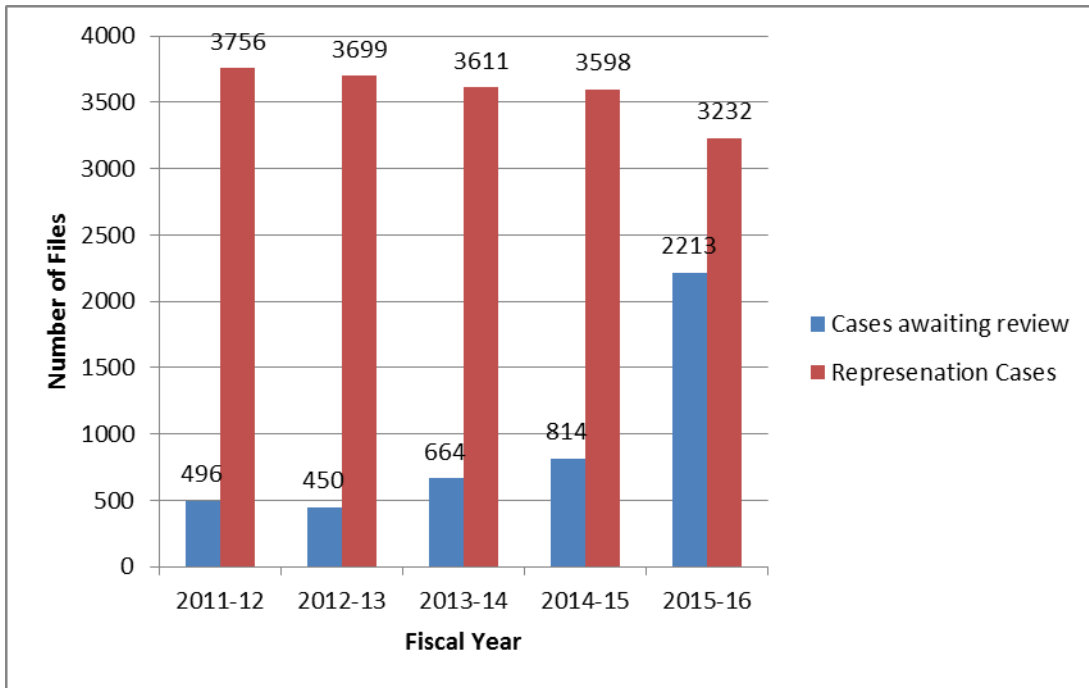
The OWA is committed to providing quality and timely service to all of our clients. Unfortunately, however, the demand for representation services is high and in the past, sometimes OWA did not have a worker adviser immediately available to open a file at the conclusion of the case review process. This meant that until 2015-2016, following case review, workers' cases were placed on a waiting list for representation service. This meant that a worker might wait initially for a case review and then later on also wait for assignment of a Worker Adviser for representation. During the years prior to 2012-2013, this two stage system did not result in overall lengthy delays, because cases were being processed through the system reasonably quickly, including many case resolutions at the WSIB operating level and internal appeals level. However, as the proportion of appeals at the WSIAT level grew, delays began to develop at both the case review and case assignment stages and the inventory at those stages grew. This is documented in Figure 1.

As of April 1, 2015, there were a total of 607 cases in the case review and case assignment stages, some of which had experienced delays of up to two years. In response, OWA began implementing its new service delivery model, which would require a delay at just the initial stage, with case review taking place only when a worker adviser was available to accept the representation case immediately if the case review indicated a reasonable chance of success. The first stage of implementation was to clear the prior inventory, which was accomplished by January 2016. In the meantime, workers requesting case review during 2015-2016 had to wait, unless they were in a case prioritization category – of which 127 were accepted immediately during the fiscal year.

Total Case Inventory

Figure 1 shows the evolution of total case inventory over the past five years, including the transition to a new service delivery model in 2015-2016. For each year, the bar graph on the left side is the total of cases awaiting case review or case assignment. A conversion has been done to allow an “apples and apples” comparison with the 2015-2016 graph, which reports only one number – the number of workers awaiting case review. In the fourth quarter of 2015-2016, the increase in the number of workers awaiting case review had moderated significantly. Stabilization and reduction were projected for 2016-2017.

Figure 1: Total Case Inventory



Decisions obtained for OWA clients

In 2015-2016, OWA obtained a total of 2,264 decisions from the adjudication and appeals levels of the WSIB and from WSIAT, a decrease of 18% from the previous year's total of 2,742 (see Table 2). The overall reduction resulted mainly from the slowdown in case processing in 2015-2016 as OWA focused on eliminating the prior case inventory; and from the large proportion of representation cases waiting at the WSIAT level. In spite of the overall reduction in decisions, OWA increased its outcomes at WSIAT by 8% from the 2014-2015 levels, from 386 to 417.

The 2,264 decisions obtained in 2015-2016 involved a total of 3,783 issues versus 4,364 in 2014-2015, a reduction of 13%. Overall success rate increased significantly, from 39% in 2014-2015 to 45% in 2015-2016. This was the highest level in the past five years. It is likely that the higher success rate at the operating level reflected the fact that worker advisers significantly reduced the number of cases taken back to that level for reconsideration, choosing only those where they determined that there was a significant chance of success. The increase in success rate should also mean that a smaller proportion of OWA cases will ultimately progress to the WSIAT level, which should help moderate case inventory there.

Table 2: Decisions by Level and Success Rate

Decisions by Level	2011-12	2012-13	2013-14	2014-15	2015-16
WSIB – Operating Level	2,055	1,872	1,669	1,433	1,085
% of Issues Allowed at Operating Level	26%	25%	31%	32%	36%
WSIB – Appeal Level	1,136	1,287	1,178	927	762
% of Issues Allowed at the Appeals Branch	47%	39%	44%	41%	44%
WSIAT	488	373	378	386	417
% of Issues Allowed at the WSIAT	67%	58%	60%	57%	65%
TOTAL DECISIONS FROM ALL LEVELS	3,679	3,532	3,225	2,746	2,264
TOTAL ISSUES IN DECISIONS FROM ALL LEVELS	6,020	5,854	5,425	4,364	3,783
Total % of Issues Allowed at all Levels	39%	31%	39%	39%	45%

Performance Achievements

Early and Alternative Dispute Resolution

OWA's long-term target is to obtain 70% of all decisions obtained by early (EDR) or alternative dispute resolution (ADR). This represents a major contribution by OWA to reducing pressure on the formal appeals system. In 2013-2014, 78% of all OWA decisions were obtained by early or alternative dispute resolution; this increased to 79% in 2014-2015. The level declined to 76% in 2015-2016, mainly as a result of the reduction in operating level decisions. OWA still exceeded its commitment and we do not anticipate a problem meeting it in future.

Timeliness of Representation Service

OWA's long-term target is to offer representation service in 100% of all cases within 120 days of the worker's request. From 2010-2011 to 2014-2015, this was measured in terms of length of time on

OWA's waiting list for representation service. In 2013-2014, OWA opened 88% of all cases placed on the waiting list for representation services within 120 days and 94% in 2014-2015. However, this measure did not capture waiting time for case review; and it also did not capture the sometimes lengthy time that some injured workers waited for representation service. This became particularly significant in 2014-2015, when a total inventory of 607 cases developed at these two stages.

Part of the OWA's implementation of a new service delivery model was development of a new measure which would capture the full waiting time. This is because the new model required workers to wait only until the offer of a case review – after that, there would be little further delay because of the fact that a case review would only be offered when a worker adviser was available to take the case if sufficient merit was found.

This meant that during the transition, timeliness of service in 2015-2016 was measured in two ways. For cases remaining from the previous service model, the measure was still the proportion opened for representation within 120 days. The achievement was 62%.

For cases handled with the new service delivery model, the measure was the proportion of workers added to the waiting list during the year who were offered a case review within 120 days. Due to transitional delays, only the 127 priority cases (5.6%) met that criterion. Ordinary cases waited an estimated average of 10.5 months. It was anticipated that during 2016-2017, case inventory would stabilize and then decrease, with a gradual reduction in waiting time.

REPORT ON THE OWA'S HEALTH AND SAFETY REPRISAL COMPLAINT MANDATE

Under its occupational health and safety reprisals mandate, the OWA provides the following services to non-union workers who may have suffered reprisal for following or trying to enforce their rights under health and safety laws:

- Information and advice
- Representation in complaints under s. 50 of the Occupational Health and Safety Act (OHSA)
- Educational services

In addition to serving individual workers, the OWA works with the Ministry of Labour and community partners to ensure that the system serves the needs of non-union workers.

Description of Services

Services under the OWA's occupational health and safety reprisals mandate are delivered by the Occupational Health and Safety Reprisals Program (OHSRP) from the OWA's provincial office in Toronto. Most workers contact the program through its province-wide toll free phone number. Worker representatives travel to attend proceedings when they are held outside of Toronto. In 2015-2016, worker representatives traveled to London, Ottawa, Sudbury, Timmins and Thunder Bay to represent workers.

The OHSRP provides escalating levels of service depending on the situation and needs of the worker. Some workers' service requests are resolved by providing information or advice (advisory services), while others may require formal legal representation (representation services).

Advisory Services

New Requests

Every request for service or assistance from a worker to the OHSRP is recorded as a new request (NR). New requests are resolved when the worker has been provided with assistance, usually summary advice or by setting up a formal intake appointment.

Summary Advice

Workers are provided with summary advice if a formal intake appointment is not required. Most often this is because the worker's situation does not fall within the mandate of the program (e.g., it lacks necessary elements of a health and safety reprisal or the worker is unionized) or the worker chooses not to proceed to an intake. In such cases workers are given information and, where possible, appropriate referral information.

Intake

At the intake stage, a worker receives a telephone consultation with a worker representative. Workers are asked to supply documentary evidence, which is reviewed prior to the interview. In the intake interview, the worker representative gathers information, provides advice and assesses the strengths and weaknesses of a potential reprisal complaint. If sufficient evidence exists and the

worker chooses to pursue a reprisal case, an offer to represent is made. If the evidence is insufficient, the worker is provided with detailed legal advice and appropriate referral information.

Representation Services

When representation services are provided, the worker formally retains the OWA as his or her legal representative. The OHSRP provides legal representation at all stages of a reprisal complaint to the OLRB. These include:

- Drafting and filing of an application to the OLRB to initiate the OWSA reprisal complaint
- Attempting to negotiate a settlement with an employer prior to formal mediation by the OLRB (early dispute resolution)
- Representation at formal mediation conducted by the OLRB
- Representation at hearings and/or consultations before the OLRB
- Ensuring employer compliance with minutes of settlement and OLRB orders

Achievements

Summary of Achievements

Demand for service under the occupational health and safety reprisals mandate remained high for 2015-2016. For the first time since the inception of the program there was a decline in key advisory and representation numbers, but this followed two years of rapid and large growth. Overall, key measures remained at levels similar to those for 2014-2015.

It appears that the level of demand experienced in 2014-2015 may have been exceptionally high and that the 2013-2014 and 2015-2016 levels are more representative of long-term demand for services from OHSRP. It is likely premature to reach this conclusion, however, because of the relatively small size of the program and the lack of long-term statistics upon which to base an analysis.

Furthermore, the program has done only limited outreach and there may be additional worker populations who are unaware of the OWA's services.

Finally, client feedback indicates that workers who receive representation services from the OHSRP are very happy with the quality of assistance they received.

Advisory Services

New Requests and Summary Advice

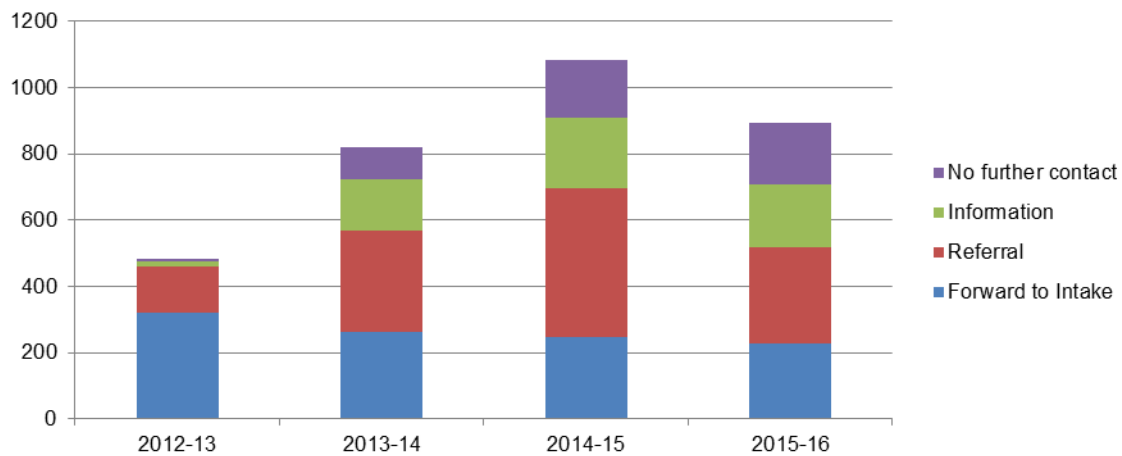
In 2015-2016, new requests and summary advice declined for the first time since the inception of the OHSRP in 2012-2013. This decline followed two years of substantial increases, however, and the numbers of new requests received and summary advice provided were still above 2013-2014 levels. This suggests that service demand was exceptionally high in 2014-2015, although the lack of long-term data makes it difficult to assess whether this is a reliable conclusion. Overall, the increased demand seen at the inception of the program has held and demand for OHSRP services remains high.

Despite the change in absolute numbers, the proportion of new requests forwarded to the intake stage remained relatively stable: 25% in 2015-2016 versus 23% in 2014-2015.

Table 1: New Requests for Service: 2015-2016

	2012-13	2013-14		2014-15		2015-16	
	Quantity	Quantity	Annual Change	Quantity	Annual Change	Quantity	Annual Change
New requests received	502	894	+78%	1137	(+27%)	906	-20%
New requests resolved							
Forward to intake	322	264	-18%	246	-7%	227	-8%
Referral	139	305	+119%	451	+48%	290	-36%
Information	15	155	+933%	213	+37%	191	-10%
No further contact	9	98	+989%	172	+76%	184	+7%
Withdraw service	0	1	N/A	0	-100%	0	0%
Total	485	823	+70%	1082	+31%	892	-18%

Chart 1: Disposition of New Requests for Service: 2012-2013 to 2015-2016



Intake

The number of intakes carried out declined slightly (5%) from 2014-2015 to 2015-2016. This reduction was smaller than the reduction in new requests resolved. There was a small increase in the proportion of new requests forwarded to the intake stage (25% in 2015-2016 versus 23% in 2014-2015) which may in part account for the difference.

Chart 2: Disposition of Intakes: 2012-2013 to 2015-2016

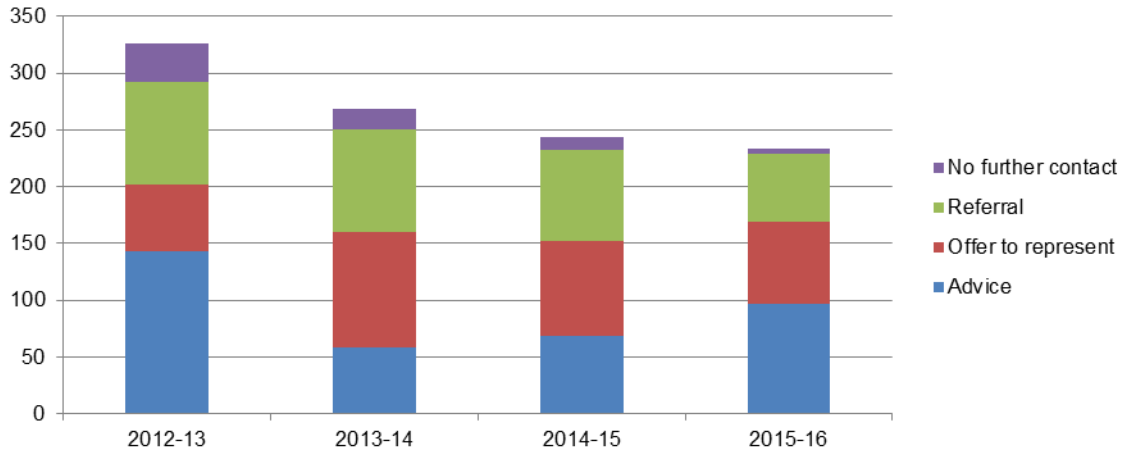


Table 2: Disposition of Intakes: 2012-2013 to 2015-2016

Outcome	2012-13	2013-14		2014-15		2015-16	
	Quantity	Quantity	Annual Change	Quantity	Annual Change	Quantity	Annual Change
Advice	143	58	-59%	69	+19%	97	+41%
Offer to represent	59	102	+73%	83	-19%	72	-13%
Referral	90	90	0%	80	-11%	60	-25%
No further contact	34	19	-44%	12	-37%	5	-58%
Withdraw service	0	0	0%	2	N/A	0	-100%
Total	326	269	-17%	246	-9%	234	-5%

Representation Statistics

Representation Outcomes

In 2015-2016, representation outcomes declined for the first time since the inception of the program. This follows two years of rapid and significant growth, however, and demand for representation services remains high.

As with advisory services, the data suggest that service demand was exceptionally high in 2014-2015 and that 2013-2014 and 2015-2016 levels may more accurately reflect a baseline level of demand. Again, it is difficult with the limited experience of the program to determine whether this is a reliable conclusion.

The reduction in number of representation outcomes is also likely a result of reduced capacity within the program due to significant staffing vacancies during the year. This conclusion is supported by the fact that representation outcomes declined more than new requests and summary advice.

Chart 3: Representation Outcomes 2012-2013 to 2015-2016

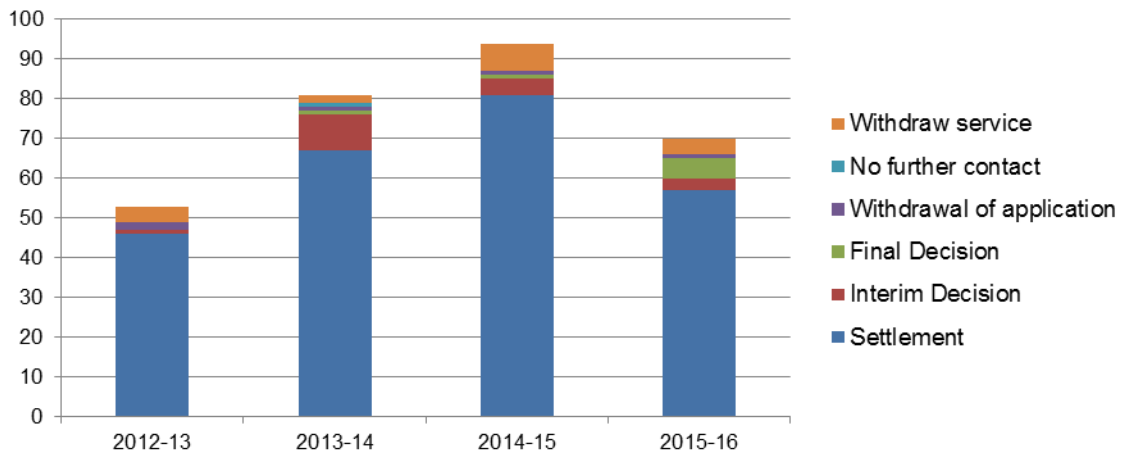


Table 3: Representation Outcomes 2012-2013 to 2015-2016

Outcome	2012-13	2013-14		2014-15		2015-16	
	Quantity	Quantity	Annual Change	Quantity	Annual Change	Quantity	Annual Change
Settlement	46	67	+46%	81	+21%	57	-30%
Interim decision	1	9	+800%	4	-56%	3	-25%
Final decision	0	1	N/A	1	0%	5	+400%
Withdraw application	2	1	-50%	1	0%	1	0%
No further contact	0	1	N/A	0	-100%	0	0%
Withdraw service	4	2	-50%	7	+250%	4	-43%
Total	53	81	+53%	94	+16%	70	-26%

Total Case Inventory

Table 4 shows the total caseload inventory for the OHSRP as of March 31, 2016. Due to technical limitations in the program's case management system, these data are not available for prior years.

Due to the nature of the OHS reprisals work, the total caseload inventory for the OHSRP at any given point in time appears relatively small, but this is potentially misleading. OHS reprisal cases are continually active and, because they are resolved relatively quickly, they are closed relatively quickly and replaced with new files.

Table 4: Total Caseload Inventory on March 31

File Status	2016
	Quantity
New request	38
Intake	20
Representation	28
Total	86

Client Satisfaction Levels

Representation clients consistently expressed a very high rate of satisfaction with the service provided by the OHSRP.

Upon closure of their files, representation clients are asked to complete a client satisfaction survey. In 2015-16, 100% of respondents reported that they were “very satisfied” overall with the service they received from the OHSRP (the highest rating on the survey). The response rate on these file closure surveys is approximately one in five. Clients are also asked to provide comments. They are provided in Appendix C to this report.

Educational Services

In addition to answering workers’ questions about health and safety reprisal complaints by phone, the OWA also promotes its website as a source of information. The OWA website contains a section on reprisals which contains information on:

- What health and safety reprisals are
- How workers can enforce their rights
- How the OWA can provide assistance
- Other organizations that can provide assistance

Outreach and Partnerships

In 2015-2016, outreach for the OHSRP continued to focus on system partners to help ensure better communications and referrals for workers within the occupational health and safety system.

Program staff also continued to develop relationships and work cooperatively with community legal clinics and organized labour.

APPENDIX A – FINANCIAL REPORT FOR THE FISCAL YEAR 2015-2016

Account	Final Budget*	Total Actual Expenditures**	Variance	Variance %
Salary & Wages	7,683.1	7,391.6	291.5	3.8%
Benefits	1,790.1	2,057.5	(267.4)	(14.9%)
Other Direct Operating Expenses (ODOE)				
Transportation & Communications	300.0	260.2	39.8	13.3%
Services (incl. Office Leases)	1,428.7	1,342.3	86.4	6.0%
Supplies & Equipment	100.0	76.7	23.3	23.3%
ODOE TOTAL	1,828.7	1,679.2	149.5	8.2%
OWA TOTAL	11,301.9	11,128.3	173.6	1.5%

* Final Budget = Printed Estimates +/- TBO, re-alignment of funds by Standard Account.

** Total Actual Expenditures including Office Leases

*** Total annual remuneration of appointee is \$131,450

APPENDIX B - NOTEWORTHY WORKPLACE SAFETY AND INSURANCE APPEALS TRIBUNAL (WSIAT) DECISIONS BY OFFICE OF THE WORKER ADVISER STAFF

The WSIAT summarizes its significant decisions and identifies those that are especially important as noteworthy. A selection of noteworthy decisions resulting from OWA representation is summarized below.

Decision No. 1749/11

The Tribunal found that exposure to benzene more likely than not made a significant contribution to the worker's development of acute leukemia (AML) and death at age 42. The Panel based its decision on the established association between benzene exposure and AML and the lack of other possible causes of the development of disease in such a young man.

Decision No. 126/16

The 85 year old worker had suffered a crush injury to his hip and thigh, for which he had a 15% pension. The WSIB denied entitlement for a lift chair because the WSIB policy says that only those with 100% pension are entitled to assistive devices.

The Tribunal found that the policy was intended to provide guidance on what severely impaired workers had a right to but could not have been intended to disentitle all other workers. In the circumstances of this case the worker was entitled to the lift chair.

Decision No. 2491/15

The worker suffered a hand injury. He had a pre-existing non-compensable condition for the same hand. The WSIB had reduced his non-economic loss (NEL) award from 14% to 5% because of the pre-existing condition.

The Tribunal found that the pre-existing impairment couldn't be measured, should be considered minor, and that no reduction of the NEL award was appropriate. The Tribunal also found that the pre-existing condition was not in the same area of the hand and did not cause the worker's loss of grip strength or sensory loss. The NEL should be increased to reflect these losses.

Decision No. 1392/15

The NEL (non-economic loss) clinical specialist ignored the NEL assessor's range of motion findings in favour of the worker's doctor's range of motion findings. The ARO endorsed this approach. At the Tribunal, the worker adviser argued that the NEL assessor's findings should be preferred. The Tribunal agreed.

Decision No. 626/15

In this case, the WSIB did the NEL assessment of a low back impairment based on a review of the medical evidence on file, even though there was no information about lateral flexion. The NEL clinical specialist presumed that, in the absence of information, lateral flexion was normal. The Vice Chair found that the on-file medical evidence was insufficient and ordered an assessment by a NEL roster physician.

Decision No. 1429/15

In 2006 the WSIB decided that it was not cost-effective to retrain this older worker. It decided to pay him full loss of earnings (LOE) benefits and told him this would continue until he turned 65 unless his circumstances changed. According to the legislation, the worker's final LOE review had to be conducted 72 months from the date of the accident, which was in May 2010. In August 2010 the WSIB sent the worker for a second labour market re-entry (LMR) assessment. At that time the WSIB determined that the worker could return to work as a cashier and it reduced his LOE benefits.

The Tribunal noted that while there are some exceptions to the 72 month rule, none of them applied in this case. Therefore, the worker was entitled to full LOE benefits until age 65.

Decision No. 2385/15

The WSIB determined that the worker would not benefit from an LMR plan and granted full LOE to age 65. A year prior to the 72 month lock-in, the WSIB referred the worker to work transition and deemed her able to work full time in the suitable occupation determined for the worker at the LMR assessment stage. On appeal, the Tribunal found that there had been no improvement in the worker's condition from the time that the Board had found her unemployable and restored full LOE.

Decision 1067/15

The worker was employed in construction on an irregular basis. When the WSIB recalculated his long term earnings rate, his LOE benefits were reduced because of a period during which he received social assistance. The Tribunal found that the periods during which the worker received social assistance should be factored out of the recalculation period and his LOE increased.

Decision No. 26/16

The worker, who drove a school bus part-time, was injured while working as a volunteer fire chief. He returned to work as the fire chief, but was unable to return to work as a school bus driver. Consistent with its policy, the WSIB did not consider his earnings from the bus driver's job when calculating his LOE benefit. The Tribunal found that applying the policy in this case would produce an unfair and unintended result. The worker's LOE should include consideration of his earnings as a bus driver.

Decision No. 650/15

A suitable employment or business (SEB) as a teacher was identified for an injured worker. The worker completed the training but unable to find a full-time position as a teacher, so he accepted a position as an occasional teacher. WSIB found that the worker was underemployed and deemed him able to earn full-time teaching wages.

WSIAT found that the worker was entitled to LOE benefits based on his actual earnings. He was employed within the SEB, and was not under-employed within the meaning of WSIB policy.

Decision No. 1871/15

The worker was unable to find work in the suitable occupation (SO) of office clerk, but obtained a minimum wage job. At final review, the WSIB determined that she was able to earn \$15 per hour as an experienced office clerk and reduced her LOE. The Tribunal found this to be unreasonable, given the worker's age (65), and ordered that her earnings be based on her actual earnings.

Decision 428/15

The worker was determined to be able to work 30 hours per week in the SEB of purchasing and inventory clerk. The worker was working within the SEB for minimum wage at 20 hours per week and was looking for, but unable to find, full-time work. The Tribunal found that the worker was not "under-employed" and that LOE should be based on the worker's actual earnings.

Decision No. 2036/15

The worker had entitlement for a neck and shoulder disablement. He returned to work with the accident employer but was terminated for non-compensable reasons. The Tribunal held that termination for non-compensable reasons does not always preclude a LOE award. In this case, the Vice-Chair held that, because the work provided by the employer exceeded the worker's medical restrictions and was therefore unsuitable, the worker's loss of earnings remained connected to the work injury. In the result, the worker was entitled to LOE and a work transition assessment.

Decision No. 1976/15

The worker had a 15% permanent disability pension (PD) for a 1989 injury to his low back. He suffered a second injury in 2008 when he was 62, again to his low back and was unable to return to his pre-injury work. When he was assessed for a NEL, the result was 15%, the same as the prior PD award. Accordingly, the worker was denied a NEL for the 2008 injury.

After psycho-vocational testing in 2009, the Board found the worker unemployable. In 2012, the Board decided that, because there was no permanent impairment as a result of this second accident, no LOE was payable.

The Tribunal found that, functionally, the 2008 accident had caused a deterioration in the worker's back such that he was unable to work in his pre-injury job. While the worker was not granted a NEL for this injury, the Tribunal granted full LOE to age 65.

Decision 1335/15

The worker had entitlement for noise-induced hearing loss (NIHL). He stopped working in 2001 and in 2012 had a cochlear implant. He sought entitlement for benefits associated with the cochlear implant. The worker had another condition, otosclerosis, that affected his hearing. The medical evidence showed that the NIHL contributed 40% and the otosclerosis contributed 60% to the need for the implant. Because the compensable injury was a significant contributing factor, entitlement was granted.

Decision 287/16

In *Decision No. 1275/12*, the worker was granted entitlement for post-concussion syndrome (PCS) for a 1989 compensable accident. The matter was remitted to the WSIB for ongoing entitlement. The WSIB found that the worker had completely recovered and denied ongoing entitlement. On appeal, the Tribunal found that the worker had ongoing symptoms, preferring the medical evidence of the worker's doctors over those of the Board's specialist who did only a file review. The Tribunal ordered that the worker was entitled to a permanent disability award for PCS.

Decision 711/15

The worker was injured in 2004 when cement blocks fell on his head. In 2006, the WSIB decided that the worker had recovered from his injuries. The worker appealed that decision and, in *Decision No.*

1216/11, the Tribunal granted entitlement for NEL awards for the worker's head and neck injuries and remitted the question of LOE entitlement after 2006 back to the WSIB.

The WSIB granted a 27% NEL. Initially, it determined that the worker was able to work full time at no wage loss. On appeal, a WSIB Appeals Resolution Officer (ARO) reduced this to part-time hours. The medical evidence showed that the worker suffered post-concussion syndrome, memory impairment, neck pain, headaches, dizziness, near blackouts, speech problems, and blurred vision. With physical activity, he suffered vertigo, vomiting and fatigue. The Panel found the worker to be unemployable and ordered full LOE until age 65.

Decision 514/15

The worker injured her shoulder in October 1997, followed by an injury to her cervical spine, thoracic spine, right upper extremity and lumbar spine in June 1998. She was granted initial entitlement for neck and upper back repetitive strain injuries in March 2000. Her lumbar spine/low back injury was recognized in 2008 after a Tribunal hearing. In *Decision 668/08*, she was granted entitlement for her low back and her NEL was increased from 21% to 35%. In 2011, her NEL was increased to 41%. LMR was delayed because of significant psychological issues due to her husband's sudden death.

In 2008, a SEB of "general office clerk" was selected, and she was referred for academic upgrading followed by a work placement and job search assistance. The LMR service providers heavily accommodated her and noted concerns about her ability to handle any type of work on a sustained basis. In 2012, it was determined that she could earn minimum wage working 20 hours per week in the SEB. On appeal, the ARO found that the worker was not unemployable, that the SEB was suitable, but that more work transition services were required.

The Tribunal found the worker to be unemployable because of the worker's physical limitations documented by the worker's doctors, the LMR instructor and the LMR service provider. Full LOE was allowed.

APPENDIX C - CLIENT TESTIMONIALS – WORKPLACE INSURANCE PROGRAM

*** is the rep for my case. He reviewed my file carefully and timely after he took care of my case. He deal with my case very professionally and communicated with me very kindly, clearly and easily understood. I am very satisfied with his service, attitude, professional knowledge and result. I am very appreciative with him and his team.

I just want to say thank you for all the help and support. OWA is just amazing!!! Without OWA's support I don't know if I would have been able to keep fighting my case. Thank you all so much.

All was wonderful. Thank you for everything even though the outcome wasn't what I wished for, I was content and satisfied with all your efforts/time. Once again, thank you so much, for always listening to me.

My rep was fantastic, well knowledgeable and went the extra mile to support my case. I was completely satisfied and happy with the work [the Worker Adviser] did.

In my case 'very satisfied' should read 'greatly satisfied'. OWA's mission to help vulnerable people in need is a noble and great mission and should be kept that way! Jason's performance during my appeal was result of his professionalism, passion and dedication to his work. He is a very valuable asset to your office.

Just a huge THANKS to all the staff with whom I dealt with. *** and *** they were both caring and VERY understanding. Thanks for fighting my case. Would have been lost without OWA.

I am very pleased with my case settlement so I can't think of anything to change. Yes, I was very happy with my case handler ***. She spoke well at my hearing and presented my case to my satisfaction. I thank you very much. The office of the Worker Adviser is very important for people like me who have limited resources to pursue cases like mine. Keep up the good work. Again thank you.

***was very kind and understanding. I don't think you could have a better person assisting me with my fight. I always worry that the person that will help me will have that "I don't care" attitude but not ***. She fought like I was her only client.

*** thank you so very much much for all the help you provided in the dealing with WSIB. Your caring and compassion made things a bit easier during such a difficult time in my life.

Amazing staff – kind and understanding – very helpful. Helped to talk – relieved stress regarding work and injury.

Client testimonials – Occupational Health and Safety Reprisals Program

“The service I received was awesome. I cannot think of any way I could improve it. This was the best experience I have ever had with any government agency.”

“Overall, I was extremely happy with the entire process. Thank you so much for all you did to help me through this matter.”

“I would like to thank [worker representative] for her outstanding pride, workmanship and dedication to justice.”

“Wonderful representative—fought for me and gave the best service. Very personable and understanding. Thank you for your awesome service.”

“[Worker representative] was courteous, understanding, and very knowledgeable. Thank you!”

“My representative provided me with excellent service.”

“[Worker representative] exceeded my expectations in customer service. [He] was extremely knowledgeable and compassionate to the needs of the client. Thank you for making this such a positive experience!”

APPENDIX D – OWA OFFICE LOCATIONS

TORONTO & EASTERN REGION

HEAD OFFICE & TORONTO OFFICE

123 Edward Street
Suite 1300
Toronto, ON M5G 1E2

SCARBOROUGH OFFICE

305 Milner Avenue
Suite 918
Scarborough, ON M1B 3V4

OTTAWA OFFICE

347 Preston Street
3rd Floor
Ottawa, ON K1S 3H8

TIMMINS OFFICE

60 Wilson Avenue, Suite 303
Timmins, ON P4N 2S7

ELLIOT LAKE OFFICE

50 Hillside Drive North
Elliot Lake, ON P5A 1X4

SOUTHWEST REGION

LONDON OFFICE & SARNIA SATELLITE

495 Richmond Street
Suite 810
London, ON N6A 5A9

WATERLOO OFFICE

155 Frobisher Drive
Unit G (213)
Waterloo, ON N2V 2E1

WINDSOR OFFICE

100 Ouellette Avenue
10th Floor
Windsor, ON N9A 6T3

SUDBURY OFFICE

159 Cedar Street
Suite 304
Sudbury, ON P3E 6A5

NORTH REGION

SAULT STE. MARIE OFFICE

70 Foster Drive
Suite 480
Sault Ste. Marie, ON P6A 6V4

CENTRAL REGION

DOWNSVIEW OFFICE

145 Sir William Hearst Avenue
Suite 125
Downsview, ON M3M 0B6

HAMILTON OFFICE

119 King Street West
13th Floor
Hamilton, ON L8P 4Y7

ST. CATHARINES OFFICE

301 St. Paul St.
9th Floor
St. Catharines, ON L2R 7R4

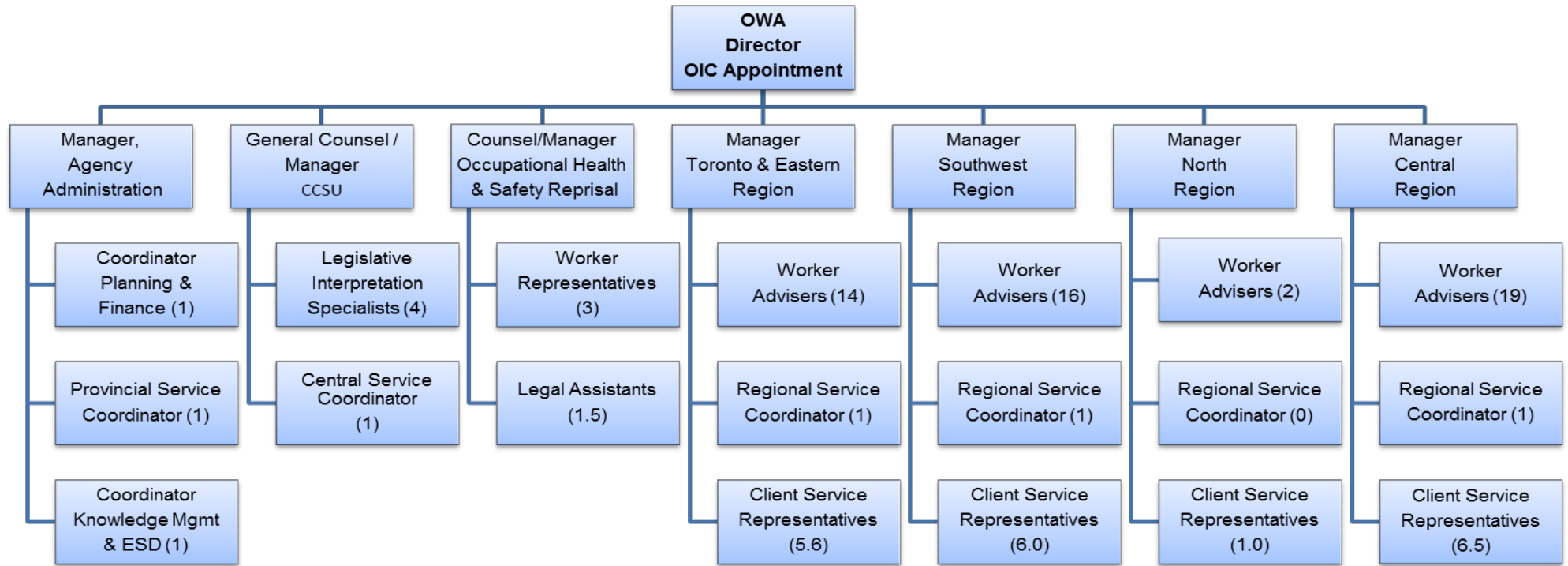
MISSISSAUGA OFFICE

10 Kingsbridge Garden Circle,
Suite #512
Mississauga, ON L5R 3K6

THUNDER BAY OFFICE

435 South James Street
Suite 335
Thunder Bay, ON P7E 6S7

APPENDIX E – ORGANIZATION CHART



2015–2016 OWA STAFF ALLOCATION = 93.6 FULL TIME EQUIVALENTS (FTE)