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Estimates of the Nature and Extent of Claim Suppression in British Columbia's Workers Compensation System



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The views, findings, opinions and conclusions expressed herein do not represent the views of WorkSafeBC.

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Executive Summary

Purpose

The purpose of this research is to investigate the nature and approximate extent of claim suppression in the workers' compensation system of British Columbia. Our aim is to provide guidance to WorkSafeBC in understanding the extent of claim suppression and the circumstances that facilitate or inhibit tendencies to suppress claims.

The research is based on two types of evidence: an analysis of a sample of WorkSafeBC claims files and surveys of workers and employers.

Terminology Used in this Report

It is important to distinguish under-claiming, misrepresented claims, and claim suppression.

Under-claiming: workers who appear to be entitled to a WorkSafeBC benefit, but choose not to submit a claim, or having submitted a claim, choose not to proceed with the claim. Under-claiming may be the result of improper pressure or inducement on the part of an employer. However, under-claiming may also result from other factors that are unrelated to improper pressure or inducement, such as not knowing how to submit a claim, or preferring to use a sick leave plan instead of making a workers' compensation claim.

Misrepresented Claims: claims that are submitted and subsequently classified as no time loss (or medical benefits only) claims, notwithstanding that the injuries or diseases involved lost working time.

Claim Suppression: any overt or subtle actions by an employer or its agent which have the purpose of discouraging a worker from reporting a work-related injury or disease or claiming WorkSafeBC benefits to which he or she would likely be entitled. In the absence of inducement or pressure not to report an incident to WorkSafeBC or not to claim an earnings replacement benefit, under-reporting and under-claiming alone do not constitute claim suppression

In the sections of this report that analyze data from a sample of claims files, we sometimes refer to “problematic” files. These contain evidence that is anomalous with the status of the file as a no time loss claim or as a time loss claim that was rejected, suspended or abandoned. In some cases, there are data in the file suggestive of claim suppression. However, for most of the “problematic” files, we cannot determine if they reflect under-claiming, misrepresentation or claim suppression. We can only say that these files are associated with a risk of under-claiming, misrepresentation or claim suppression.

Caution in Interpreting Results

It is not possible through either survey evidence or claim file evidence to form a definitive conclusion on the incidence of under-claiming, misrepresentation or claim suppression.

All survey evidence is subject to sampling error. Moreover, while the sampling techniques used in our surveys were designed to obtain samples broadly representative of the B.C. labour force and economy, we deliberately oversampled some categories of workers more likely to have experienced claim suppression and we oversampled employers in two industries where our claim file analysis suggested a greater risk of claim suppression. Survey evidence is also based on respondents’ perceptions and recollections, either of which may be faulty. As well, injuries or diseases that respondents believed were covered by WorkSafeBC may not be covered. Some kinds of employment in B.C. are exempt from coverage or subject to optional coverage.

The analysis of claim files may identify problematic files, suggestive of suppression or misrepresentation, but it would be improper to draw a definitive conclusion that a particular no time loss claim should have been treated as a time loss claim or that a time loss claim that was rejected, suspended or abandoned should have proceeded. There may be circumstances that are relevant that were not evident in the file analysis. For example, a medical practitioner may have recommended time off work unaware that the employer had accommodated the worker’s return to work through modified work arrangements. A claim may have been abandoned because the initial information about the incident being work-related was incorrect. A claim may also have been abandoned because the worker was not covered by WorkSafeBC.

Plausible Estimates of Risk

While our research does not allow for precise or definitive conclusions, comparing the results of the risk estimates from the file analysis with the results of the surveys enables us to offer general conclusions on the plausible range of the risk of under-claiming, misrepresentation and claim suppression in B.C. These conclusions can also be compared to the findings from other studies.

Methodology

The research involved surveys of workers and employers and analyses of randomly selected claims files.

Worker Survey

The Worker Survey was a web-based survey of 699 residents of B.C. who experienced a self-reported, work-related injury or disease within the past three years. Participants were recruited from the large pool of persons randomly recruited by Ipsos to participate in web surveys. The survey was conducted in 2019 and early 2020 in three waves: 349 persons who were randomly selected; 251 who indicated that their educational attainment was trade qualification or less (as this category was under-represented in the first group); and a third wave conducted in Cantonese, Mandarin and Punjabi, with 99 respondents. The key purposes of the survey were to formulate estimates of the incidence of non-claiming or under-claiming and to identify the motivations for non-claiming or underclaiming, in particular to estimate the degree to which non-claiming or under-claiming reflected claim suppression.

Employer Survey

The purpose of this survey was to obtain insight into employers' policies and practices related to reporting work-related injuries or diseases and employers' perceptions of the policies and practices of other employers in their industry. The survey was conducted by Ipsos in two waves, by telephone, using publicly available contact information from sample providers who maintain these types of databases. The first wave (n=100) was stratified across all industries based approximately on their share of reported WorkSafeBC claims. The second wave (n=50) generated additional sample for the construction industry and the transportation and warehousing industry. These industries were chosen because of their comparatively higher claims incidence. The purpose of this over-sampling of high incidence

industries was to generate a sufficient number of observations to allow for analysis of potential correlating factors, such as employer size and whether the employer offered paid sick leave and/or an incentive program to remain accident free.

Analysis of Accepted No Time Loss Claims Files

A random sample of no time loss (NTL) claims processed between 2016 and 2019 was administered by WorkSafeBC. A total of 1,043 NTL files was sampled. A Review Team comprising experienced WorkSafeBC staff reviewed these files, using a template developed by the research team, and noted characteristics of the files in an Access database. The anonymized database was then provided to the research team for analysis.

The purpose of analyzing accepted no time loss claims was to identify files in which there was documentary evidence suggestive of a risk that the incident actually entailed lost working time notwithstanding that the claim had been submitted and accepted as a no time loss claim.

Analysis of Time Loss Claims that were Rejected, Suspended or Abandoned

A random sample of rejected, suspended or abandoned time loss claims was reviewed to determine whether there was evidence in the file that would raise doubts as to why the worker did not proceed with the claim and whether there were any indicia in the file that could suggest a risk that suppression was a factor in the worker's decision not to proceed. A total of 601 rejected claim files was sampled. As with the no time loss files, these files were also reviewed by the WorkSafeBC Review Team who, using a template, noted characteristics of the files in an Access database and provided an anonymized database to the research team for analysis.

Key findings

Worker Survey

Underclaiming

- The analysis of under-claiming focused on workers reporting that they lost two or more days of working time as a result of their work injury. These workers represented 57.8% of the sample. A two-day threshold was chosen to exclude incidents that respondents might have regarded as insufficiently

serious to warrant submitting a claim and also to avoid situations where respondents might include the day of the incident as a day of lost working time.

- For cases meeting the two or more lost days threshold, 53.7% did not submit a claim to WorkSafeBC. This finding should not be treated as a precise measure of under-claiming because of the limitations inherent in survey data and because it cannot be determined from the survey whether the injury or disease was actually compensable.
- 26.7% of respondents with two or more days of time loss received wage continuation from their employer or through a sick leave plan.
- Under-claiming is more common among those who immigrated to Canada, workers with lower educational attainment, workers who are not union members, employees of small employers, and those who work on a temporary basis (directly or through temp agencies).
- Claim suppression is not the leading reason for under-claiming. The most important reasons for under-claiming were lack of knowledge about entitlement or how to apply for WorkSafeBC benefits (40.1% of those with two or more days of lost working time) and not believing that it was worth the time to apply for benefits (35.9%). Perceived pressure not to claim (including from colleagues) was reported in 14.3% of this subsample.

Claim suppression

- Different indicators were used to estimate the approximate incidence of claim suppression. The estimates range from 3.7% of the sample to 13.0%, with estimates towards the lower end being more likely.
 - The low end of this range was derived from evidence that 26 respondents (3.7% of the sample) lost two or more days of working time and also reported that they did not apply for WorkSafeBC benefits because they thought they would 'get into trouble' or their employer 'pressured' them not to apply. (If we also include cases where fellow employees encouraged the worker not to apply because 'they feared they would lose a bonus', the number rises to 31, or 4.4% of the sample.)
 - If we look at all cases (regardless of whether or not the worker filed a claim) where respondents reported that their employer asked them

not to report time loss and/or threatened them with repercussions if they did so, the number is 91, or 13.0% of the sample. Claim suppression behaviour does not always deter a worker from submitting a claim. Moreover, in some cases, the claim suppression behaviour may not have been sanctioned by senior management. Approximately a third of the respondents who reported claim suppression behaviour also reported that their employer assisted them in filing the report to WorkSafeBC.

- Bonus plans that reward a group of workers for being accident-free may incent those workers to discourage fellow employees from reporting incidents or submitting WorkSafeBC claims. 40.7% of employers whom survey respondents described as engaging in claim suppression behaviour operated incentive schemes compared to 6.4% of employers whom survey respondents did not describe as engaging in this behaviour.

Employer Survey

- Almost three-quarters of employers (72.0% of the respondents) provided either or both of a sick leave/disability plan or medical benefits plan. Roughly a fifth of these employers (21.3%, representing 15.3% of the total sample) allow their employees to access benefits through one of these plans instead of claiming WorkSafeBC benefits.
- 10.7% of the employers reported that they provide a bonus or incentive to their employees to maintain an accident-free workplace.
- 6.0% of employers reported their belief that, in their industry, time loss injuries are 'rarely or never' reported to WorkSafeBC. (Although the wording of the question is different, it is noteworthy that this figure falls within the range of the estimates from the worker survey of the incidence of claim suppression.)
- 26.7% of the employers reported their belief that, in their industry, time loss injuries are reported to WorkSafeBC as no time loss injuries 'all the time or almost all the time.' 25.3% expressed their belief that no time loss injuries were "rarely or never" reported to WorkSafeBC.

Analysis of Accepted No Time Loss Claims Files

- The analysis of this sample of claims files focused on anomalies which are strongly suggestive of claim misclassification (i.e., that the claim should have been a time loss claim) but which cannot be interpreted as definitively finding that misclassification occurred. Moreover, any misclassification could have an explanation that is unrelated to any deliberate claim misrepresentation by employers. The findings should be interpreted as estimates or indicators of the risk of under-claiming and misclassification. Deliberate claim misrepresentation or claim suppression would be a sub-set of these risk files.
- A number of indicators (risk flags) were used to identify a file where the documentary evidence suggested a risk of misclassification. The risk flags were drawn from data in the worker's report (Form 6), health care professional reports (physician, physiotherapist, chiropractor) and from evidence that the worker pursued or received lost earning benefits from another benefit plan.
- The lower boundary estimate of the risk of misclassification is 4.1%. This is based on cases where the Form 6 explicitly indicated time loss beyond the day of the incident or the Form 6 provided a date for return to work more than two days after the date of the incident.
- The upper boundary estimate of the risk of misclassification is 12.1%. This is based on the presence of any risk flag.
- The WorkSafeBC claim review team were asked whether, based on the description of the injury in Forms 6 and 7 and the related medical reports, the reviewer believed that the injury was consistent with no time loss. The reviewers had reservations about 5.2% of the files—within the range of our risk estimates, but closer to the lower end of that range.

Analysis of Time Loss Claims that were Rejected, Suspended or Abandoned

- A sample of time loss claims that were rejected, suspended or abandoned was analyzed to identify anomalies that suggest it may have been a valid claim.
- There is no suggestion that WorkSafeBC acted improperly in not proceeding with the claims under review. Suspended claims included cases where there was a lack of necessary information, the worker could not be contacted, or

the worker did not respond to a request for further information. Some claims were voluntarily withdrawn. Rejected claims included cases where the claim was not compensable, for example, because the worker was not covered by the workers' compensation act or was an independent operator who chose not to register for the optional coverage.

- Between 11.8% and 18.6% of the claims in the sample were found to be problematic in that there is documentary evidence in the file suggesting a compensable, work-related injury or disease. The lower bound figure is derived from cases where Form 6 states that the worker missed work beyond the day of the incident, sought medical attention and there was a witness to the incident. The upper bound drops the latter condition. The fact that a file is problematic does not necessarily imply that the worker's decision not to proceed with the claim was the result of undue pressure from the employer.
- The WorkSafeBC Review Team found that 21.8% of rejected, suspended or abandoned claims likely pertained to compensable time loss injuries.
- In a subset of the problematic files, the documentary record suggests there may have been employer pressure, meaning that claim suppression may have occurred. A risk of claim suppression was found for 2.3% to 8.3% of the full sample. The lower bound figure is derived from cases where the physician report (Form 8) recommends seven or more days off work and the claim was subject to an employer objection. (This does not definitively imply pressure but does raise the risk of employer claim suppression.) The upper bound is derived from cases where Form 6 states that the worker missed work beyond the day of the incident and sought medical attention but there is no Form 7 from the employer.

Comparison with Other Studies

There is a growing empirical literature analyzing reporting rates for work-related injuries. Four of these studies explored issues similar to those examined in this report.

- Manitoba Workers Compensation Board: a study was undertaken by Prism Economics in 2013 using a similar file analysis procedure and a similar worker survey design.

- Ontario Workplace Safety and Insurance Board: as study was undertaken by Prism Economics in 2013 using a similar file analysis procedure.
- Shannon & Lowe (2002) reported the results of a national survey which included a question on claiming workers compensation benefits.
- Nadlin & Smith (2020) reported the results of a survey undertaken in B.C., Alberta and Ontario which included a question on claiming workers compensation benefits.

Differences in the file analysis procedures, survey design and the structure of the samples make precise comparisons impossible. However, the studies concur on the importance and approximate magnitude of under-claiming, the risk of misrepresenting lost working time incidents as incidents that entailed no lost working time and the existence of claim suppression conduct on the part of employers. The table below compares the key findings of these studies.

Under-Claiming Rate for Lost Working Time Benefits	
WorkSafeBC study	53.7% (2 or more days of lost working time)
Manitoba study	40.2% (2 or more days of lost working time)
Shannon & Lowe	40.0% (all presumptively eligible claims)
Nadalin & Smith	64.5% (all presumptively eligible claims)
Risk that a Time Loss Injury was Reported as a No Time Loss Injury	
WorkSafeBC study	4.1% to 12.1%
Manitoba study	14.3% to 35.1%
Ontario study	5.0% to 10.0%
Estimated Incidence of Claim Suppression Conduct	
WorkSafeBC study	3.7% to 13.0% (depending on question)
Manitoba study	11.5%

Section 1: Introduction

Purpose

The purpose of this research is to investigate the nature and approximate extent of claim suppression in the workers' compensation system of British Columbia. The methodology, outlined in more detail below, is derived from that used in the Prism Economics and Analysis study for Manitoba. This study was referenced in Restoring the Balance, the "Petrie Report" of March 31, 2018 to the Board of Directors, Workers' Compensation Board of BC.

Petrie noted that "the issue of claim suppression is fraught with allegations that are difficult to document" (page 34 of the report). He noted that the problem had been addressed by other workers' compensation boards and, in particular, cited the Prism Economics and Analysis study commissioned by the Manitoba WCB. Petrie recommended "that the Board of Directors consider initiating an independent review of this issue by a qualified organization with a scientific methodology to determine whether and to what extent claims suppression is a significant issue in the BC workers' compensation system" (Recommendation 21).

There have been no studies that would support a credible estimate of the incidence or seriousness of claim suppression in the B.C. compensation system. Our aim is to provide guidance to WorkSafe BC in understanding the extent of claim suppression and the circumstances that facilitate or inhibit tendencies to suppress claims. More specifically, the proposed research has three objectives: (1) to provide a plausible estimate of the risk of claim suppression in B.C.'s workers compensation system, (2) to better understand the channels through which claim suppression operates, and (3) to identify the types of workers, industries and workplaces which are associated with the greatest risk of claim suppression.

Key Definitions Used in this Report

The following defines the terms that are used in this report:

- **Under-claiming:** workers who appear to be entitled to a WorkSafeBC benefit, but choose not to submit a claim, or having submitted a claim, choose not to proceed with the claim. Under-claiming may be the result of improper pressure or inducement on the part of an employer. However,

under-claiming may also result from other factors that are unrelated to improper pressure or inducement, such as not knowing how to submit a claim.

- **Misrepresented Claims:** claims that are submitted and subsequently classified as a medical benefits-only claims (i.e., no time loss claims), notwithstanding that the injuries or diseases involved lost working time.
- **Claim Suppression:** any overt or subtle actions by an employer or its agent which have the purpose of discouraging a worker from reporting a work-related injury or disease or claiming WorkSafeBC benefits to which he or she would likely be entitled. Included in this understanding of claim suppression are the actions of third-party claims administrators acting on behalf of an employer and incentive or demerit plans which are perceived by workers as a deterrent to reporting work-related injuries or claiming benefits. Claim suppression also includes the practice of improperly offering a worker continued wages in lieu of the worker submitting (or proceeding with) a WorkSafeBC claim for lost earnings. Claim suppression is distinct from both employer under-reporting and worker under-reporting or under-claiming, although claim suppression likely occurs in tandem with under-reporting and under-claiming. Nevertheless, in the absence of inducement or pressure not to report an incident to WorkSafeBC or not to claim an earnings replacement benefit, under-reporting and under-claiming alone, do not constitute claim suppression
- **Problematic Claims Files:** files that contain documentary evidence that is anomalous with the status of the file as a no time loss claim or as a time loss claim that was rejected, suspended or abandoned. In some cases, the anomalies may be suggestive of claim suppression. However, we cannot say how many of these 'problematic' files reflect actual incidents of under-claiming, misrepresentation or claim suppression. We can only say that these files are associated with a risk of under-claiming, misrepresentation or claim suppression. In some cases, the anomalies may suggest that this risk is significant.

Caution in Interpreting Results

Throughout the report, it is stressed that it is not possible through either survey evidence or file evidence to form a definitive conclusion on the incidence of under-

claiming, misrepresentation or claim suppression. As will be described, this report is based on two types of evidence – an analysis of a sample of WorkSafeBC claims files and surveys of workers and employers.

All survey evidence is subject to sampling error and other factors that need to be taken into account. First, while the sampling techniques used in our worker and employer surveys were designed to obtain samples broadly representative of the B.C. labour force and economy, we deliberately oversampled some categories of workers more likely to have experienced claim suppression. Second, we also oversampled employers in two industries where our claim file analysis suggested a greater risk of claim suppression. Third, the survey population may have included persons who are not covered by B.C.'s *Workers Compensation Act*. Fourth, it should be borne in mind that survey evidence is based on the respondents' perceptions and recollections, either of which may be faulty. And fifth, injuries or diseases that respondents believed were covered by WorkSafeBC may not be covered.

File analysis may be suggestive, but in the absence of a more thorough investigation, it would be improper to draw a definitive conclusion that a particular no time loss claim should have been treated as a time loss claim or that a time loss claim that was rejected, suspended or abandoned should have proceeded. There may be circumstances that are relevant that were not evident in the file analysis. For example, a medical practitioner may have recommended time off work unaware that the employer had accommodated the worker's return to work through modified work arrangements. A claim may have been abandoned because the initial information about the incident being work-related was incorrect. A claim may also have been abandoned because the worker was not covered by WorkSafeBC. These, and other considerations, make it impossible to draw a definitive conclusion from a file analysis.

Risks and Plausible Estimates

While neither survey evidence nor file analysis enable us to draw definitive conclusions about under-claiming, misrepresentation and claim suppression, these research procedures nevertheless do provide us with a basis for estimating the approximate magnitude of the risk that work-related, time loss injuries were not reported accurately (or at all) and that the affected workers did not receive the compensation to which they were likely entitled under the *Workers Compensation*

Act. Comparing the results of the risk estimates from the file analysis with the results of the surveys enables us to offer general conclusions on the plausible range of the risk of under-claiming, misrepresentation and claim suppression in B.C.'s workers compensation system. These conclusions can also be compared to the findings from other studies.

Methodology

The research strategy for this report adapted to the B.C. workers compensation system a research strategy that was similar to that applied in Manitoba and Ontario by Prism Economics and Analysis. The strategy involved surveys of workers and employers and analyses of randomly selected accepted no time loss claims files (a.k.a. 'medical benefits only' claims) and the files pertaining to time loss claims that had been rejected, suspended or abandoned.

1. Worker Survey

The Worker Survey was a web-based survey of 699 residents of B.C. who experienced a self-reported, work-related injury or disease within the past three years. Participants were recruited from the large pool of persons randomly recruited by Ipsos to participate in web surveys. Participants were pre-coded for key demographic characteristics. All responses in the survey pertained to the respondent's most recent or only work-related injury. Persons who described themselves as "an owner" were excluded from the sample. The survey was conducted in 2019 and early 2020 in three waves. The first wave comprised 349 persons who were randomly selected from the Ipsos panel. The second wave comprised 251 persons who indicated that their educational attainment was trade qualification or less. The purpose of the second wave was to augment the portion of the total sample in this educational attainment category, as this category was under-represented in the first wave. The third wave was conducted in Cantonese, Mandarin and Punjabi and comprised 99 respondents. Based on the 2016 Census, these are the three largest non-English-speaking language groups in B.C.

The purposes of the survey were: (1) to formulate estimates of the incidence of non-claiming or under-claiming, (2) to identify the motivations for non-claiming or underclaiming, (3) in particular to estimate the degree to which non-claiming or under-claiming reflected claim suppression, (4) to gauge the extent to which such

claim suppression was attributable directly to an employer or to a third-party claims administrator acting on behalf of an employer, (5) to identify the channels through which claim suppression operates and the types of workers and workplaces that are more often affected by claim suppression, and (6) to note the claims that appear to have been associated with attempted claim suppression but which were nevertheless duly submitted to WorkSafeBC.

2. Employer Survey

To capture the perspective of employers, Ipsos conducted a telephone survey of employer representatives about issues related to claim suppression. (Ipsos obtains contact information for organizations by NAICS code from sample providers who maintain these types of databases.) The purpose of this survey was to obtain insight into employers' policies and practices related to reporting work-related injuries or diseases and employers' perceptions of the policies and practices of other employers in their industry. The survey was conducted in two waves. The first wave (n=100) was stratified across all industries based approximately on their share of reported WorkSafeBC claims. The second wave (n=50) generated additional sample for the construction industry and the transportation and warehousing industry. These industries were chosen because of their comparatively higher claims incidence. The purpose of this over-sampling of high incidence industries was to generate a sufficient number of observations to allow for analysis of potential correlating factors, such as employer size and whether the employer offered paid sick leave and/or an incentive program to remain accident free.

The first wave was administered in February 2020. The second wave was administered in March of 2020. Although a portion of the second wave coincided with the shift to remote working as a result of Covid-19, Ipsos reported that they were able to administer the survey without difficulty. The surveys were typically answered by a human resources manager or, in the case of small enterprises, the owner-operator.

The Employer Survey asked questions concerning: (1) perceptions of employee reporting of work-related injuries, (2) the use of incentive programs to encourage workplace safety, (3) the use and accountability of third-party claims managers, and

(4) perceptions of the incidence of claim suppression or mis-representation of time loss claims as no time loss claims in their industry.

Although the employer survey was completed after the claim file analysis, we report on its findings below after the discussion of the findings of the worker survey (and before our presentation of the results of the claims analysis), as it is helpful to consider the two sets of survey data together.

3. Analysis of Accepted No Time Loss Claims Files

A random sample of no time loss (NTL) claims processed between 2016 and 2019 was administered by WorkSafeBC. A total of 1,043 NTL files was sampled. A Review Team comprising experienced WorkSafeBC staff reviewed these files using a template developed by the research team and noted characteristics of the files in an Access database.¹ The anonymized database was then provided to the research team for analysis.

The purpose of analyzing accepted no time loss claims was to identify files in which there was documentary evidence suggestive of a risk that the incident actually entailed lost working time notwithstanding that the claim had been submitted and accepted as a no time loss claim. It should be noted that to expedite the receipt of benefits, many no time loss claims are auto-processed with only limited or no review by a WorkSafeBC claims analyst. (Auto-processing can accept a claim, but claims that are rejected must be referred to the adjudication team.)

Employers may have an interest in misrepresenting a time loss incident as a no time loss claim because they may believe that the latter is less likely to seriously affect their experience rating or to increase the likelihood of an inspection. Such misrepresentation of claims may or may not be associated with inducements or threats to get the worker to “play along”. Claim suppression can only be asserted when the misrepresentation of claims is deliberate on the part of an employer and the worker is subject to inducements or threats to support the misrepresentation. An incident that involved lost working time could be incorrectly reported as a no time loss claim because the worker preferred to access lost earnings benefits through a

¹ Despite best efforts by the WorkSafeBC review team to control for inter-reviewer differences in assessment, the possibility of inter-reviewer variability cannot be excluded.

sick leave plan or some other source or simply did not want to go through the process of claiming lost earnings benefits. Claim suppression, therefore, is not equivalent to under-claiming, but pertains only to those instances of under-claiming where inducements or threats also came into play.

The analysis consisted of defining Risk Flags which identified files in which there were anomalies that appeared to be inconsistent with the status of the claim as a no time loss injury or disease. These anomalies could include, for example, medical reports recommending time off work, a prescription of opioids, direct evidence in the file of lost working time or direct evidence of earnings continuation through a sick leave plan, EI or CPP. These files were characterized as 'problematic'. It must be stressed, however, that while an anomaly may suggest a risk of misrepresentation of a claim, it cannot be treated as definitive evidence of misrepresentation. For example, a medical practitioner's recommendation for time off work may have been made without knowledge of the modified work arrangements provided by the employer to accommodate a prompt return to work.

4. Analysis of Time Loss Claims that were Rejected, Suspended or Abandoned

A random sample of rejected, suspended or abandoned time loss claims was reviewed to determine whether there was evidence in the file that would raise doubts as to why the worker did not proceed with the claim and whether there were any indicia in the file that could suggest a risk that suppression was a factor in the worker's decision not to proceed. A total of 601 rejected claim files was sampled. As with the no time loss files, these files were also reviewed by the WorkSafeBC Review Team who, using a template, noted characteristics of the files in an Access database and provided an anonymized database to the research team for analysis.

There is no suggestion in this report that WorkSafeBC acted improperly in not proceeding with the claims under review. There are numerous reasons why WorkSafeBC may not proceed with a claim. Indeed, it would have been contrary to WorkSafeBC's regulatory mandate to have proceeded with a claim notwithstanding the worker's expressed desire not to proceed or the absence of necessary supporting information. The focus of the analysis in this report is not whether WorkSafeBC should have proceeded with the claim. Rather the purpose of the analysis is to ascertain whether the file records indicate a risk that a worker did not

proceed with a time loss claim that, on its face, was likely valid. These files can be characterized as 'problematic'.

The fact that a file is 'problematic' does not necessarily imply that the worker declined to proceed with the claim as a result of undue pressure from his or her employer or fellow workers (who may have feared losing a group bonus). A worker could decide not to proceed with a likely valid claim for lost working time for reasons that are unrelated to improper pressure. These might include language barriers, not knowing how to process a claim, aversion to bureaucracy, or access to essentially equivalent benefits under a sick leave plan. The worker's motivation for not proceeding with a likely valid time loss claim cannot be discerned from the file records. Under-claiming should not be equated with claim suppression, although claim suppression may contribute to underclaiming. Nevertheless, it is possible to identify factors that suggest a risk that claim suppression may have been relevant to the worker's decision not to proceed with the claim. These factors could include employer objections to claims that appear to be valid on their face, a long gap between submission of the Form 6 (Worker's Report) and the Form 7 (Employer's Report), or evidence of wage continuation through a sick leave plan or other channel.

The initial review of the claims was undertaken by WorkSafeBC staff. (This was the same procedure that was used in the Manitoba study). Having the files reviewed by experienced staff of WorkSafeBC introduced an element of quality control and also an opportunity for an independent assessment of the anomalies in the files.

5. Corroborating Worker Survey (Not Undertaken)

The original research plan included a follow-up survey of the workers who were the subject of claims judged to be 'at-risk'. This survey would have assessed, based on the worker's recollection, whether the risk flags had indeed identified an instance of claim suppression. The need to obtain worker consent in writing prior to the worker being surveyed made this follow-up survey impractical to administer. It was decided, therefore, to use the resources to double the sample size of the worker survey (outlined above). The inability to proceed with the corroborating survey does limit the nature of our conclusions. In particular, we are careful in the results to refer to estimates of the risk of claim suppression rather than to try to quantify with precision the actual incidence of claim suppression.

Ethics and Privacy

The Institute for Work & Health (IWH) regards the access to personal information for research purposes as an important privilege. Protecting the privacy of individuals whose data is used in our research and the confidentiality of personal information in our custody is of priority concern. This project's privacy and ethics practices were governed by the privacy guidelines established by the Institute for Work & Health, in alignment with WorkSafeBC guidelines, and approved by the University of Toronto's Research Ethics Board.

As part of this project, the Institute signed an amendment to our original funding agreement with the WorkSafeBC entitled, Schedule G – Privacy Protection Schedule. The Schedule G stipulates privacy regulations and guidelines that are aligned with the existing IWH privacy guidelines². In addition, Schedule G outlines the Institute's responsibility to ensure that project partners (Prism) and contractors (Ipsos) are in compliance with WorkSafeBC's privacy requirements. As such, the Institute shared the Schedule G and established written research agreements with each partner/contractor requiring compliance with the terms of Schedule G. Secure practices had already been put in place as part of the Institute's privacy protections.

The project received ethics approval from the University of Toronto Research Ethics Board (RIS protocol #37258). The ethics protocol outlined key areas which included an overview of the study rationale and methods as outlined in this report. In addition, the research team provided a thorough outline of how all participant data would be transferred, stored and protected³

The project involved the collection and exchange of data between four partners: WorksafeBC, Ipsos, Prism Economics and Analysis and IWH:

- WorkSafeBC: collected and conducted the review of their claimant files using a database template provided by the research team.
- Ipsos: a research polling firm, conducted the worker and employer surveys.

² The IWH privacy handbook contains an abbreviated set of policies and procedures: <https://www.iwh.on.ca/publications/privacy-confidentiality-and-data-security-handbook-of-research-policies-and-procedures>

³ Ethics approval letter was shared with WorkSafeBC

- Prism Economics and Analysis: organized the data from the claim file review and surveys and led the analysis of the data by the research team.
- IWH: arranged all secure transfer of data and participated in the analysis of the claim file review and survey data.
- All data in the custody of the Institute is protected from unauthorized access and disclosure. The methods of protection include:
 - organizational security: including training and educating employees, ensuring the completion of up-to-date employee confidentiality agreements, limiting access to data, investigating potential security breaches, and enforcing consequences for breaches of policy;
 - physical security: including keeping data in a locked facility with tracked key access, locking filing cabinets, restricting access to offices, and ensuring onsite security after hours; and
 - technical security: including using firewalls and passwords, encrypting data, and anonymizing personal information by removing person-identifiable variables

It is important to note, IWH and Prism Economics and Analysis did not receive any identifiable data through the course of this project. All data was de-identified prior to transferring by the respective parties. All data that was transferred to and from the Institute for Work and Health was sent via a Secure File Transfer Protocol client (sFTP). Project data at IWH is stored on a secure server with restricted access to the research team and key network administrators that ensure organizational computer system security. As part of our research agreement, Prism Economics and Analysis stored the data in the same manner. Ipsos provided that their storage methods corresponded to our privacy requirements.

Consent

Survey participants were provided with an informed consent process that occurred at the beginning of the survey allowing individuals to decline, proceed, or opt out of any question. The consent process included a description of the project via the telephone, with the additional information (a study information letter) available via email or telephone, based on participant preference. To comply with our funder's request to strengthen our consent language around freedom of information and protection of privacy, we informed all worker survey participants of British Columbia's

privacy legislation as it relates to the survey. This additional text around privacy legislation did not apply to the employer survey as it did not ask for responses that contain personal data, rather their perspectives on industry and workplace practices.

Collection and Transfer of Data

A brief overview⁴ on the data collection and transfer methods are outlined below:

1. Review of Claim Files Database

WorkSafeBC created the claims file database and conducted the review of claims files themselves, using a risk analysis template created by the research team. Neither IWH nor Prism Economics and Analysis had access to WorkSafeBC claim files. WorkSafeBC sent the de-identified claim file review database to the IWH for analysis using their sFTP. The claims database was transferred to Prism Economics and Analysis using the IWH sFTP. IWH/Prism provided an aggregate analysis report of the claims file review data to WorkSafeBC.

2. Worker Survey

Ipsos contacted workers who experienced a self-reported, work-related injury or disease within the past three years in the province of British Columbia. The pool of respondents was drawn from a large pool (30,000+) of persons randomly recruited by Ipsos to participate in web surveys and pre-coded for key demographic characteristics. Ipsos provided de-identified data from the survey to IWH. IWH shared the data with Prism using the sFTP. IWH/Prism Economics and Analysis provided an aggregate analysis report of the survey data to WorkSafeBC. No primary data was sent to WorkSafeBC.

3. Employer Survey

Ipsos contacted employers using publicly available contact information. The polling was conducted by telephone using a web-based survey. Ipsos transferred de-identified data from the survey to IWH via sFTP. IWH then transferred the data to Prism Economics and Analysis using the sFTP for analysis. IWH/Prism Economics and Analysis provided an aggregate analysis

⁴ Full details and practices were prepared as part of the ethics protocol.

report of the survey data to WorkSafeBC. No primary data was sent to WorkSafeBC.

Retention of Data

The Institute will retain project data records for a period of seven years, as outlined in our ethics protocol, at which point all project data will be destroyed. Upon the funder's confirmation that the study is complete, all partners and contractors will be asked to destroy the data using secure methods.

Section 2: Literature Review

Our research builds on two earlier reports by Prism Economics and Analysis which examined the incidence and risk of employers inducing workers not to claim or to misreport instances of workplace injury or illness. The first report was prepared for Ontario's Workplace Safety and Insurance Board (WSIB). The second was commissioned by the Workers Compensation Board (WCB) of Manitoba. A key member of our team, John O'Grady (who is a founding Partner at Prism Economics and Analysis), led both of these studies.

As described in both the Ontario WSIB and Manitoba WCB reports by Prism Economics and Analysis, previous research provides varying estimates of the extent to which workers in Canada do not file workers' compensation claims for workplace injuries and illnesses. The general consensus is that approximately 20-40 per cent of all plausibly compensable work-related injuries and illnesses are not claimed by workers.

Some evidence supports the existence of demographic risk factors for non-claiming. Higher non-submission rates have been linked to younger workers, educational attainment at the high school level or lower, and persons working in smaller workplaces. Immigrant workers and agricultural workers have been highlighted as likely having higher rates of worker non-claiming. As well, a lack of knowledge of rights to workers' compensation and how to claim benefits was found to be a potentially strong contributor.

Employer Under-reporting

Two Canadian surveys support an estimate of approximately seven to eight per cent as the rate of employer non-reporting of plausibly compensable workplace injuries and illnesses (IWH & IBM, 2005; Ipsos Reid, 2008). However, these figures may be underestimates owing to the nature of both survey designs. Along with employer non-reporting, the misreporting of workplace injuries and illnesses by employers is recognized as a problem. Specifically, studies suggest that three to 9.5 per cent of no time loss claims are misreported because the worker does, in fact, take time off work (Prism Economics and Analysis, 2013).

Employer-induced Claim Suppression

The evidence from the literature is too limited to support an estimate of the rate of claim suppression, as distinct from under-claiming. The distinction between worker non-claiming, employer under-reporting and employer-induced claim suppression is complicated by the interpretation of what constitutes inducement. Many subtle factors may or may not be seen as inducement.

In 2010, Harry Arthurs was commissioned to conduct an independent funding review of Ontario's workplace safety and insurance system. Within the report, titled *Funding Fairness*, Arthurs describes anecdotal evidence of claim suppression, which was subsequently highlighted in Prism Economics and Analysis' 2013 report for the WSIB. The evidence surfaced in public hearings in the spring of 2011, with "some 50 first- and second-hand accounts of workers victimized by employers' intent on avoiding surcharges or claiming rebates" (Arthurs, 2012). Due to the non-statistical and largely unconfirmed nature of the evidence heard in the hearings, not enough information was available for Arthurs to gauge the magnitude of claim suppression.

Prism Economics: Ontario WSIB Report

Review of Enforcement Files

Prism Economics and Analysis analyzed 100 enforcement files, randomly selected from files in which charges had been laid against an employer between 1996 and 2012. 48 contained indications of the employer directly trying to prevent a worker from filing a claim. Overt threats towards injured or ill workers made up nine of these 48 cases. The other 39 cases involved more subtle forms of inducement. The analysis of enforcement files found that nearly half of the employers failed to register with the WSIB. The construction industry and the food services/hotel industry were overrepresented among these cases.

Review of No Lost Time Claim Files

Prism Economics and Analysis investigated indications of possible misreporting among 2,707 WSIB no lost time claim (NLTC) files. This analysis was conducted to identify NLTC files that should have been submitted as lost time claims (LTCs). The 2,707 NLTC files were selected by a pre-screening process to identify a subset of injuries that were believed to be more likely to require time off from work. This subset of files was manually reviewed to identify anomalies suggestive of the likelihood of

lost time, including severe injuries, use of an ambulance, admission to hospital, medical recommendations to take time off work, and evidence in the file of lost time. For instance, in 48 cases an ambulance was required; in 46 cases the worker was admitted to hospital. Although misreporting could not be proven, the research suggests a material risk of misreporting based on anomalies and inconsistencies in the claim files.

Review of Abandoned Lost Time Files

Claim suppression may encompass instances where employers persuade workers to discontinue the claims process. Prism Economics and Analysis investigated a sample of LTC files that were abandoned by the claimant between 1991 and 2011. Of 3,016 abandoned files, more than 80 per cent were lacking the worker's report of injury or illness. Additionally, in 768 files, the worker failed to respond to the WSIB's request for further information. In many cases, files were abandoned even though there appeared to be a material amount of lost time. Moreover, claim suppression may have been present in some of the cases of wage continuation. In 15.7 per cent of the files, there were records of wage continuation that may have been provided in lieu of WSIB benefits. Similar to the other forms of file analysis, the magnitude of actual claim suppression could not be discerned from the investigation of the abandoned lost time files.

Prism Economics and Analysis: Manitoba WCB Report

Manitoba Survey of Injured Workers

As documented in Prism Economics and Analysis' report to the Manitoba Workers Compensation Board (Prism Economics and Analysis, 2013), a telephone survey of 200 people with workplace injuries was conducted in Manitoba throughout July and August of 2013. 70.8 per cent of respondents who had lost time from work received some wage continuation from their employer for their time off. The survey also found that failing to apply for workers' compensation benefits was less commonly the result of overt claim suppression. Situations such as employers providing workers with incorrect information on eligibility, pressuring workers not to submit a claim, or workers believing they would get in trouble should they submit a claim were all categorized as overt claim suppression. Overt claim suppression was likely to have affected up to six per cent of workers who did not apply for lost earnings benefits and

up to 7.7 per cent of workers who did not apply for medical expense benefits. Some workers were aware of peers who had experienced overt claim suppression, such that 11.5 per cent of respondents had either experienced first-hand overt claim suppression or were aware of colleagues who had experienced it. The main implication was that claim suppression was material among this sample of injured workers. The suppression tended to be more subtle (e.g., in the form of wage continuation) than overt. The incidence of claim suppression was higher among workers under age 35. Gender, immigration status and unionization status did not appear to have an impact. Workplaces with 10 to 24 workers were found to have the highest rates of claim suppression.

Review of Accepted No Time Loss Claims

Prism Economics and Analysis reviewed 1,329 accepted NTLCs in Manitoba to identify indicators of high risk for misreporting, such as where the worker required time off work. Many files did not include employer incident reports. Approximately half of the files with no incident report indicated that the incident was serious enough that the worker had to visit an emergency room or a hospital. The investigators judged that 11.4 per cent of the accepted NTLCs were likely to have involved time off work. A telephone survey of 121 claimants was also conducted among a pool of claimants whose files were thought to be high risk. Approximately 40 per cent of respondents experienced lost time even though they filed an NTLC. 36.3 per cent of respondents reported having experienced at least one claim suppression activity by their employer; that percentage fell to 19.8 per cent when wage continuation was excluded. Factors influencing misreporting irrespective of the influence of claim suppression were also documented. Confusion over eligibility and how to apply for benefits were reported as main barriers. Among the sample of suspicious NTLCs, estimates of misreporting of accepted NTLCs ranged from 14.3 to 35.1 per cent; it was thought that, in some instances, the misreporting may have reflected claim suppression.

Review of Disallowed Time Loss Claims

Prism Economics and Analysis investigated disallowed TLCs from Manitoba using 922 disallowed TLC files. 74.7 per cent contained evidence of lost time, and almost half contained reports from a medical professional indicating that the worker was disabled beyond the date of his or her injury. Among the 220 files that were

disallowed because a work-related injury could not be established, 80.9 per cent included a doctor's assessment that the injury was work-related. From the disallowed TLC file analysis, a conservative estimate of the disallowed claims influenced by claim suppression was found to be 32 per cent, which fell to 18 per cent when wage continuation was omitted.

Prism Economics and Analysis conducted a follow-up survey of 47 workers among some of the higher risk files. Over half of the respondents experienced more than five days of lost time due to their injury, and the majority of respondents reported that their injury had caused them notable financial losses. 25 of the 47 individuals reported claim suppression, although the sample size was too small to substantiate firm conclusions. Of these instances, 11 were wage continuation and the other 14 were overt forms of inducement.

Other Literature Related to Claim Suppression

There is an extensive literature on under-reporting and a smaller literature that looks at evidence of employer inducement. In light of space limitations, we focus here on highlights of the Canadian studies. For a more extensive review, see the Prism Economics and Analysis report to the WSIB (Prism Economics and Analysis, 2013).

Canadian Studies of Under-Reporting and Under-Claiming

In 1992, the Research and Evaluation Branch of the Ontario Workers' Compensation Board (WCB) undertook a survey-based study of injury reporting, involving several different sets of survey data: Covered Labour Force Survey, Time Loss Claimant Survey, No Time Loss Claimant Survey, Abandoned Claimants Survey, and Employer Survey. All but the latter had small sample sizes, ranging from 75 to 255. The Employer Survey had 1100 valid responses. It found that more than 90% of employers correctly understood their reporting obligations, except for accidents that involved only first aid. The survey also found that 13.6% of respondents would allow a worker to use a few sick days rather than file a WCB claim. Re-weighting of the survey results to mirror the size and industry distribution of employers raised this estimate to 20.1%. Small employers were more likely than larger employers to allow sick leave days to substitute for WCB benefits. When asked why employees did not file WCB claims, reasons given included perceived threat to job security (20%),

income support from a sick leave or wage indemnity plan (20%), and pressure from co-workers (10%).

Shannon and Lowe (2002) report on a 2000 national population survey which identified employed persons who had experienced an injury that would likely have been eligible for workers' compensation benefits. Eligibility was based on modified work arrangements, medical treatment and/or time loss. The survey was based on 2,500 respondents from an initial sample pool of 17,361. The Shannon and Lowe study is among the most rigorous studies to use a population survey to gauge the extent of non-reporting of work injuries and disease to the workers' compensation system. The survey identified 143 cases that met the employment, injury and coverage tests. Of these, 40% were not submitted as claims for workers' compensation benefits. This does not necessarily imply that the employer failed to report the incident. Also, some jurisdictions have augmented their enforcement efforts since 2000 and improved coverage.

Mustard, Cole et al. (2003) compared WSIB lost-time claims for the period 1993 to 1998 with data from Statistics Canada's Survey of Labour Income Dynamics (SLID). SLID estimated work-related injuries with a work absence of one week or longer. The researchers derived similar estimates from WSIB administrative data. The average incidence rates over the period, 1993-1998, was 19.0% higher in the SLID data. Labour market conditions in the 1990s were generally weaker and this may have encouraged a greater incidence of under-reporting. As well, administrative and statutory changes since the 1990s may have altered conditions from those that were observed in the 1990s. Also, there is significant variability in the estimated under-reporting across the six years examined from a 12.1% to 27.8%.

Smith, Chen et al. (2011) extracted information from 9,250 WSIB no lost-time claims for 1991, 1996, 2000 and 2005. The authors report that, "almost 6% of our sample of claims were situations where the consequence of the injury was quite severe, resulting in fractures, dislocations, nerve damage, spinal cord injuries, concussions or multiple injuries." Even after excluding fractures to fingers, the researchers found that 3-4% of no lost-time claims involved "injuries where we would expect that return to work the day after injury, even to a non-demanding occupation, would be challenging."

In 2005, the Institute for Work & Health and IBM Consulting Services administered 160 interviews with employees and managers across 80 firms in healthcare, transportation and manufacturing. 7% of the 72 interviewed employees indicated that they were discouraged from reporting work-related injuries or illness to the WSIB. The represented only 5 observations. At the same time, it may be significant that these were employees in the one third of companies that agreed to participate in the interview survey. It is possible that the proportion would have been higher among nonparticipants.

The WSIB contracted with Ipsos Reid to undertake employer and injured worker surveys to gauge consumer satisfaction with its operations. The 2008 survey asked employers (n=1,000) various questions about reporting. 8% of employer respondents reported that they 'strongly agreed' or 'agreed' with the statement, 'my organization does not always report injuries to the WSIB'. A more substantial 55% strongly agreed or somewhat agreed that 'some employers are not fully reporting their WSIB claims.'

Smith, Kosny and Mustard (2009) use longitudinal SLID data over a series of five panels from 1993 to 2005. Reported instances of work-related injuries or illnesses causing an absence from work of more than seven days were linked to income tax data to determine if worker's compensation benefits were received. In total, there were 3,352 valid observations. 49% did not receive workers' compensation earnings loss benefits. 55% of respondents who did not receive workers' compensation earnings loss benefits received pay from their employer. 35% of respondents who received workers' compensation earnings loss benefits also received pay from their employer. The authors point to three factors that could qualify their analysis. First, workers' compensation benefits are not taxable. Therefore, some recipients may not have reported the income. Second, some workers identified by SLID would have been employed in non-covered industries or would have been self-employed. And third, some workers may have been maintained on payroll with benefits being paid to their employer.

Mustard, Chambers et al. (2012) compare WSIB lost-time claims with the incidence of workers reporting to hospital emergency departments with a work-related injury, for the period 2004-2008. When all emergency department, work-related injuries were compared to WSIB lost-time claims, about a third of cases (32.3%) were not reflected in WSIB lost-time claims. When the comparison was restricted to fractures or concussions (in both the ER and WSIB data series), the degree of concordance

was 99.8%. The comparison of ER and WSIB data should be read with caution. ER records include cases that did not entail time loss. They also include workers in uncovered industries or self-employed.

Alamgir et al. (2006) compared work-related hospitalizations in British Columbia to workers' compensation claim records for a cohort of workers in sawmills for the period 1989-1998. They found that compensation data under-report serious and acute injuries by about 10%. Underreporting was greater among non-whites and older workers.

Stock et al. (2012) examined data from the 2007-2008 Enquête québécoise sur des conditions de travail, d'emploi et de SST (Quebec Survey of Working and Employment Conditions and Occupational Health and Safety). They focused on persons who had lost working time as a result of a musculoskeletal injury or disease which the survey respondents perceived as entirely related to work and who were employed in nonmanagerial occupations (n=3,855). There were a total of 160 observations (4.1% of the sample). The vast majority (80.4%) did not submit a claim for workers' compensation benefits. Even among those who lost more than two weeks of work, 63.0% did not submit claims.

Nadalin and Smith (2020) examined survey data from Ontario, Alberta and British Columbia. The survey data pertained to 326 individuals who reported that they had experienced a work-related injury within the past 12 months that required time off from work. Almost two-thirds (64.5%) of these survey respondents indicated that they did not report their injury to the workers compensation system. These findings, which are the most recent published findings, are consistent with earlier studies, notably Stock et al. and Shannon and Lowe.

Canadian Studies of Factors affecting Under-Reporting, Including Employer Inducement

Employer inducement can be either overt or subtle. Overt inducement consists of threats and sanctions. Subtle inducement includes appeals to loyalty, willingness to pay wages and medical benefits in lieu of a workers' compensation claim, group-based incentive programs that foster peer pressure to suppress reports of injuries, and perceptions that an injury will diminish prospects for promotion or increase the risk of lay-off. The last of these is challenging to research because perceptions may be exaggerated, unfounded or not shared by a majority of workers. There are several

survey-based studies which shed some light on the possible magnitude of employer-induced claim suppression. Some of these also look at other issues affecting reporting, such as knowledge of rights and procedures.

In reviewing Quebec's 2007-2008 Enquête québécoise sur des conditions de travail, d'emploi et de SST, Stock et al (2012) found that 5.5% of those who did not submit a claim for a work-related musculoskeletal injury indicated that "filing a workers' compensation claim is forbidden by the employer or fear[ed] that it may be viewed negatively by the employer or co-workers". The survey also found that employers had maintained pay for 13.1% of workers who time loss owing to musculoskeletal injuries. Stock et al. found that, in Quebec, 53.5% of non-submitters thought that musculoskeletal disease was not covered by the workers' compensation system. The survey also found that 15.4% of non-submitters lacked information on the process of submitting a claim.

Hogg-Johnson et al. (2001) found in a 1996 survey of workers at a large company (n=1,203) that 6.4% of non-reporters feared layoff, unemployment or harassment. The key question, however, is whether the fear was well-founded. The survey also asked whether respondents agreed or disagreed with the statement that 'management encouraged reporting [musculoskeletal pain]'. The survey found that 55.6% of workers agreed with the statement while 15.0% disagreed.

The Ontario WCB (1992) survey of abandoned claimants found that around 20% of those who provided reasons for not reporting injuries 'did not want to hurt the employer's business'. The employer survey found that 13.6% of respondents would allow a worker to use a few sick days rather than file a WCB claim. Re-weighting of the results to mirror the size and industry distribution of employers raised this estimate to 20.1%. Small employers were more likely to allow this practice than larger employers. The WCB surveys found that the leading reason that workers did not submit a claim was that they did not believe the injury was sufficiently serious to warrant a claim. The WCB also explored with employers and workers their understanding of rights and obligations. More than 90% of employers correctly understood reporting obligations, except for accidents that involved only first aid. Around one-third of workers interviewed in follow-up to the WCB surveys had a poor understanding of their rights and obligations.

Shannon and Lowe (2002) found that the availability of paid sick leave plans as an alternative to workers' compensation benefits did not affect submission rates. This finding is counter-intuitive. It also contrasts with strong findings in the U.S. research literature. Shannon and Lowe found above average non-submission rates for four categories of respondents: workers in organizations with 25 or fewer employees, workers who were 25 years or age or younger, full-time workers, and workers whose educational attainment was less than high school completion.

Stock et al. report that 19.7% of nonsubmitters did not believe their symptoms were sufficiently severe. However, this reason was less important than lack of knowledge of coverage. The survey reported by Hogg-Johnson (2001) also found that perceived lack of severity was an important factor in no reporting musculo-skeletal pain.

Various researchers (e.g., Smith and Mustard 2009, 2010) looking at the labour market experience of immigrant workers have found that these workers are more likely to be employed in occupations and industries with higher incidence rates of occupation injury and disease. They are also less likely to receive workers' compensation benefits.

Kosny et al. (2011) offer an explanation for this pattern based on interviews with 14 social service and advocacy providers and 28 immigrant workers who had experienced a work-related injury. These interviews indicate that recent immigrant workers are likely to be fearful of job loss owing to their financial precariousness, they may conceal an injury for fear of being blamed for carelessness or fear of being terminated, and they are unlikely to be informed of their rights or to know how to go about claiming workers' compensation benefits. Also, the employers of recent immigrants may take advantage of both economic need and lack of awareness of rights to suppress injury reports.

Hennebry (2012) examines the employment conditions of agricultural workers in Canada, many of whom work under the Temporary Foreign Worker program. She reports research findings that show higher rates of occupational injury and disease and low rates of incidence reporting and compensation benefits. Fear of employer sanction, the need to continue working, and lack of awareness of rights appear to be the primary factors accounting for under-reporting by employees

Overall, the limited survey evidence suggests that overt employer inducement to suppress claims, in the form of actual threats or sanctions is unlikely to be systemic

or widespread, though it does occur. Perceived threats to job security or promotion prospects are more common, but it is difficult to gauge the degree to which these perceptions are well founded. Employees can found their fears on experience with other employers, or in the case of recent immigrants, on experiences that they bring with them.

Subtle forms of inducement are likely to be more significant than overt inducement. These include appeals to loyalty, incentive plans to remain accident free, and maintaining pay or paying medical costs in lieu of workers' compensation benefits. It is important, however, to put employer inducement - whether overt or subtle - in context. Survey evidence suggests that other factors may be as important or more important in explaining under-reporting. These include lack of knowledge of rights to benefits or how to claim benefits.

Section 3: Survey Data Collection and Analysis of Claims File Review

1. Worker Survey

Introduction

The purpose of this survey is to provide insight into under-claiming of WorkSafeBC benefits and, in particular, the degree to which this under-claiming may be attributable, in whole or in part, to claim suppression behaviour on the part of a worker's employer. It should be noted that this survey is necessarily restricted to the account of an injury and the related circumstances provided by the survey respondent. Claim suppression behaviour is unlawful. It cannot be inferred with certainty that the alleged suppression activity actually occurred. As well, it should be noted that, in some cases, employer benefit plans appear to have substituted for WorkSafeBC benefits. It must also be noted that a worker could indicate in a survey that he or she felt intimidated, even though there was no overt conduct on the part of the employer that objectively would warrant this feeling.⁵

Part I of this report summarizes the characteristics of the sample. Part II focuses on the incidence of respondent-reported claim suppression and the relationship of this behaviour to the sample characteristics reviewed in Part I. Data cells with fewer than five observations have been suppressed or combined.

⁵ In this regard the paradoxical findings reported by Hogg-Johnson should be noted. In a 1996 survey (n=1,203) of workers, all of whom were employed at the same large firm, 55.6% of respondents agreed with the statement that 'management encouraged reporting [musculo-skeletal pain]' while 15.0% disagreed. Of those who disagreed, almost half feared sanctions. Hogg-Johnson et al., "Reporting Work-Related Musculoskeletal Disorders to the Workplace: factors associated with reporting among newspaper workers," *Working Paper #173* (Toronto: Institute for Work and Health, December 2001).

Throughout this report, some data entries in tables are identified with “←” to draw attention to the finding or because it is referenced in the text.

Key Findings

The survey suggests that somewhat more than half of workers who experienced a work-related injury or disease *and* who lost two or more days from work may not be claiming WorkSafeBC benefits. The survey also suggests possible measures of claim suppression. At the low end, the survey suggests a claim suppression rate of around 3.7%. At the high end, a broader measure suggest that suppression behaviour may have been a factor in 13.0% of such cases. Other indicators in the survey suggest an incidence rate closer to the bottom end of this range. The survey findings also indicate that the most important reason for not claiming WorkSafeBC benefits is lack of knowledge about entitlements and how to apply for benefits.

Part I: Review of the Sample

Overview of the Sample

The survey sample comprises 699 residents of B.C. who experienced one or more self-described work-related injuries or diseases in B.C. within the past three years. All responses in the survey pertain to the respondents most recent or only work-related injury. Persons who described themselves as “an owner” were excluded from the sample.

The survey was conducted in 2019 and early 2020 in three waves. Each wave included only persons who reported that they had experienced a work-related injury during the past three years. The first wave comprised 349 persons who were randomly selected from the Ipsos panel. The second wave comprised 251 persons who indicated that their educational attainment was trade qualification or less. The purpose of the second wave was to augment the portion of the total sample in this educational attainment category. The third wave was conducted in Cantonese, Mandarin and Punjabi and comprised 99 respondents. The purpose of the second and third waves was to augment the representation in the sample of persons who were more likely to have experienced claim suppression or who were likely to have been under-represented in the first survey wave.

Interpreting Survey Results

As noted above, the sample was augmented to ensure a statistically relevant number of persons who might be considered more vulnerable to claim suppression. It is important to bear this in mind when interpreting the results. The sample is not precisely representative of the B.C. work force as a whole. Nor is the sample precisely representative of either claimants for WorkSafeBC benefits or the population of injured workers. It would be an error, therefore, to say that because the survey showed that x% of the sample reported claim suppression behaviour on the part of their employer, consequently x% of injured workers experience claim suppression. Rather, the survey should be interpreted as providing an indicator of the risk that certain types of workers are more likely to experience claim suppression.

Demographic Characteristics of Sample

The demographic characteristics of the sample are summarized in Table No. 1

Table 1: Demographic Characteristics of Sample (n=699)

	No.	Percent
Gender		
Men	416	59.5%
Women	283	40.5%
Total	699	100.0%
Age Group at Time of Injury		
18-34	248	35.5%
35-54	346	49.5%
55+	105	15.0%
Total	699	100.0%
Average Age	40.6	
First Language		

	No.	Percent
English	368	52.6%
Chinese (Cantonese)	28	4.0%
Chinese (Mandarin)	49	7.0%
Punjabi	22	3.1%
Other (Includes French for which there were fewer than 5 observations)	229	32.7%
Don't Know	3	0.4%
Total	699	100.0%
Immigration Status		
Born in Canada	269	38.5%
Immigrated to Canada	420	60.1%
Don't Know	10	1.4%
Total	699	100.0%
Educational Attainment		
High school or less	174	24.9%
Trade qualifications	105	15.0%
Some college/technical school or college/technical school graduate	192	27.5%
Some university or university graduate	225	32.2%
Don't Know	3	0.4%
Total	699	100.0%

Employment / Workplace Characteristics of Sample

Table 2 summarizes the workplace and employment characteristics of the sample.

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Table 2: Workplace and Employment Characteristics of Sample (n=699)

	No.	Percent
Employment Status		
An employee	602	86.1%
A manager	32	4.6%
Self-employed	65	9.3%
Total	699	100.0%
Union Status		
Union	231	33.0%
Non-Union	459	65.7%
Don't Know	9	1.3%
Total	699	100.0%
Permanent / Temporary		
A permanent employee	477	68.2%
A temporary, term or casual employee	160	22.9%
Working for a temporary help agency	14	2.0%
Other	45	6.4%
Don't Know	3	0.4%
Total	699	100.0%
Employer Size		
Fewer than 10	168	24.0%
10 to 24	132	18.9%
25 to 99	144	20.6%

	No.	Percent
100 to 499	123	17.6%
500 or more	99	14.2%
Don't Know	33	4.7%
Total	699	100.0%
Full-Time / Part-Time		
Full time (30 hours or more per week)	547	78.3%
Part time (less than 30 hours per week)	151	21.6%
Don't Know	1	0.1%
Total	699	100.0%

Table 3 shows the industry in which the survey respondents were employed at the time of their most recent or only work-related injury. Industry is based on the North American Industry Classification System (NAICS).

Table 3: Occupational Distribution of Survey Respondents (n=699)

NAICS	Sector	No.	Percent
111-113, 115 and 21	Primary industries excl forestry or logging	13	2.0%
114	Forestry or logging	11	1.6%
22	Utilities	31	4.4%
23	Construction	119	17.0%
31-33	Manufacturing	41	5.9%
41-45	Wholesale or retail trade	92	13.2%
48-49	Transportation	51	7.3%
51	Broadcasting, cultural and information industries	11	1.6%

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NAICS	Sector	No.	Percent
52	Finance and insurance	22	3.1%
72	Accommodation and food service	61	8.7%
53-56, 71, 81	Other private sector services	43	6.2%
91	Government - municipal, provincial or federal	33	4.7%
61	Education	25	3.6%
62	Health care or social services	58	8.3%
	Other	84	12.0%
	Don't Know	3	0.4%
	Total	699	100.0%

Table 4 shows the occupational distribution of the survey respondents and maps these into National Occupation Classifications (NOC) categories. As would be expected NOC 6 (Sales and Service Occupations) and NOC 7 (7 Trades, Transport and Equipment Operators and Related Occupations) account for the majority of survey respondents.

Table 4: Occupational Distribution of Survey Respondents (n=699)

NOC	Self-Described Occupation	No.	Percent
0	Management Occupations	41	5.9%
1, 2	Business, finance and administration occupations and Natural and applied sciences and related occupations	50	7.2%
3	Health occupations	28	4.0%
4	Occupations in education, law and social, community and government services	25	3.6%
5	Occupations in art, culture, recreation and sport	6	0.9%
6	Sales and service occupations	116	16.6%

NOC	Self-Described Occupation	No.	Percent
7, 8, 9	Trades, transport and equipment operators and related and natural resources, agriculture and related production occupations and occupations in manufacturing and utilities	295	42.2%
	Employee/ Staff member (unspecified)	23	3.3%
	Other mentions	77	11.0%
	No response	13	1.9%
	DK/NS	25	3.6%
	Total	699	100.0%

Injury Experience and Effect of Injury

Approximately four out of five respondents (81.7%) reported only one work-related injury or disease within the past three years. The remainder (18.3%) experienced two or more injury or disease events.

Table 5 shows that most workers (85.0%) responded to the injury or disease event in a manner that indicates a degree of seriousness, i.e., they visited a hospital emergency department, a family doctor, etc.

Table 5: Worker's Medically-Related Response to Injury or Disease Event (Multiple Answers Permitted) (n=699)

Medically-Related Response to Injury or Disease Event	No.	Percent
Visit to a hospital emergency department	276	39.5%
Visit to a family doctor or clinic	323	46.2%
Visit to a chiropractor	86	12.3%
Visit to an occupational therapist or a physiotherapist	158	22.6%
Prescription drugs	199	28.5%
Medical device (e.g. crutches, brace, hearing aid)	94	13.4%
Don't Know	8	1.1%
None of the above	97	13.9%

Table 6 summarizes how survey respondents described their injury or disease.

Table 6: Nature of Injury or Disease (Multiple Answers Permitted) (n=699)

Nature of Injury or Disease	No.	Percent
Muscle or Tendon Sprains, Strains or Tears	310	44.3%
Surface Wounds or Bruises	221	31.6%
Open Wounds	120	17.2%
Other Traumatic Injuries	40	5.7%
Fractures or Dislocations	80	11.4%
Burns	54	7.7%
Other Occupational Illnesses or Diseases	30	4.3%
Mental Health Disorder Caused by Work	55	7.9%
Don't Know	10	1.4%

Roughly 85% (85.6%) of survey respondents reported losing at least part of a work day. Almost 60% (57.9%) indicated that they lost 2 or more days of working time. (See Table 7).

Table 7: Number of Working Days Lost as a Result of Injury or Disease Event

Amount of Lost Working Time	No.	Percent
No time loss	101	14.4%
1 day or part of a day	191	27.3%
2 to 5 days	192	27.5%
6 to 10 days	84	12.0%
11 to 15 days	31	4.4%
More than 15 days	97	13.9%
Total	696	99.5%
One Day or Less, including No time loss	292	41.8%
Two Days or More	404	57.8%
Don't Know	3	0.4%
Total	699	100.0%

Table 8 shows that more than half (395/699 = 56.5%) of the respondents were advised by their doctor or health care provider to take time off work.

Table 8: No. of Respondents Advised to Take Time Off Work (n=699)

	Health Care Provider Recommend Time Off		Health Care Provider Did Not Recommend Time Off		Don't Know if Health Care Provider Recommended Time Off		Total	
	No.	Percent	No.	Percent	No.	Percent	No.	Percent
Told Doctor or Health Care Provider Injury was Work-Related	345	87.3%	103	36.1%	5	26.3%	453	64.8%
Did Not Tell Doctor or Health Care Provider Injury was Work-Related	40	10.1%	174	61.1%	5	26.3%	219	31.3%

	Health Care Provider Recommend Time Off		Health Care Provider Did Not Recommend Time Off		Don't Know if Health Care Provider Recommended Time Off		Total	
	No.	Percent	No.	Percent	No.	Percent	No.	Percent
Don't Know if they Told Doctor or Health Care Provider Injury was Work-Related	10	2.5%	8	2.8%	9	47.4%	27	3.9%
Total	395	100.0%	285	100.0%	19	100.0%	699	100.0%

Table 8 also shows that almost two-thirds (453/699 = 64.8%) told their health care provider that their injury was work-related. It may be notable that only 201 respondents received either or both of wage loss or medical benefits from WorkSafeBC. (See Table 11.) It cannot be inferred from this survey how many of the 453 health care providers who were told that the injury or disease was work-related advised WorkSafeBC of the injury, as required by the *Workers Compensation Act* (sec 163.1).

Table 9 shows that virtually all respondents returned to their prior job, although roughly half (49.4%) required some time off.

Table 9: Return to Work Status

Return to Work Status	No.	Percent
On the same day	85	12.2%
On the day after my injury	185	26.5%
After taking some time off	345	49.4%
After performing modified duties for a period of time	53	7.6%
Never	29	4.1%
Don't Know	2	0.3%
Total	699	100.0%

Part II: Under-Claiming and Claim Suppression

Under-Claiming WorkSafeBC Benefits

Table 10 shows that under-claiming of WorkSafeBC benefits appears to be widespread. This finding should not be treated as a precise measure of under-claiming because the response is based on the respondents' recollection and it cannot be determined from the survey whether the injury or disease was actually compensable. Nevertheless, subject to these cautions in interpreting the results, it is noteworthy that more than half (53.7%) of those respondents who reported losing two or more days of working time did not apply for WorkSafeBC benefits for an injury or disease that they indicated in the survey was also work-related.⁶

Table 10: Application for WorkSafeBC Benefits

	Applied for WorkSafeBC Benefits		Did Not Apply for WorkSafeBC Benefits		Don't Know		Total	
	No.	%	No.	%	No.	%	No.	%
No. of Days of Lost Working Time								
No time loss	8	7.9%	92	91.1%	1	1.0%	101	100.0%
1 Day or Part of a Day	39	20.4%	149	78.0%	3	1.6%	191	100.0%
2 to 5 Days	63	32.8%	126	65.6%	3	1.6%	192	100.0%
6 to 10 Days	44	52.4%	40	47.6%	0	0.0%	84	100.0%

⁶ The estimate of 53.7% found in this survey is a higher than the 40% underclaiming rate found by Shannon and Lowe. The Shannon-Lowe survey, it should be noted, included stronger filters to exclude claims that would likely not have been compensable. The finding that 61.5% of the respondents who reported any lost working as a result of a work-related injury or disease did not apply for WorkSafeBC benefits is consistent with the findings in Nadalin and Smith (2020).

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11 to 15 Days	19	61.3%	12	38.7%	0	0.0%	31	100.0%
More than 15 Days	58	59.8%	39	40.2%	0	0.0%	97	100.0%
Don't Know	0	0.0%	3	100.0%	0	0.0%	3	100.0%
2 Days or More	184	45.5%	217	53.7%	3	0.7%	404	100.0%
Any Time loss	223	37.5%	366	61.5%	6	1.0%	595	100.0%
Total	231	33.0%	461	66.0%	7	1.0%	699	100.0%

Table 11 summarizes how survey respondents reported the status of their claims:

Table 11: Status of Application for WorkSafeBC Benefits

Claim Status	No.	Percent
Received Wage Loss Benefits Only	58	25.10%
Received Medical Benefits Only	18	7.80%
Received Both Wage Loss and Medical Benefits	125	54.10%
Sub-Total	201	87.00%
Don't Know	6	2.60%
Did not Receive Benefits	24	10.40%
Total	231	100.00%

Table 12 shows that under-claiming appears to be common in all industries, although it may be more common in some industries. It should be noted, however, that sample sizes are small at the industry level. In this table and in subsequent tables, only persons who lost two or more days are considered. This excludes workers who reported losing only one day of working time. The reason for adopting a two-day threshold is to remove the risk of worker's whose recollection may have confused the day of the incident and the day after the incident.

Table 12: Under-Claiming WorkSafeBC Benefits by Industry Percent of Respondents who Reported Two or More Days of Lost Working Time (n=404)

NAICS	Sector	No. of Respondents in Industry	No. of Respondents Not Claiming WorkSafeBC Benefits	Under-Claiming: Percent Did Not Apply
111-113, 115 and 21	Primary industries excl forestry or logging	8	5	62.5%
114	Forestry or logging	7	6	85.7%
22	Utilities	18	13	72.2%
23	Construction	69	40	58.0%
31-33	Manufacturing	25	13	52.0%
41-45	Wholesale or retail trade	44	20	45.5%
48-49	Transportation	30	11	36.7%
51	Broadcasting, cultural and information industries	7	3	42.9%
52	Finance and insurance	14	6	42.9%
72	Accommodation and food service	39	22	56.4%
53-56, 71, 81	Other private sector services	30	21	70.0%
91	Government - municipal, provincial or federal	18	10	55.6%
61	Education	35	13	37.1%
62	Health care or social services	12	6	50.0%
	Other	47	28	59.6%
	Don't Know	1	0	0.0%

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NAICS	Sector	No. of Respondents in Industry	No. of Respondents Not Claiming WorkSafeBC Benefits	Under-Claiming: Percent Did Not Apply
	Total	404	217	53.7%

An analysis of claiming behaviour in terms of demographic characteristics suggests the following conclusions:

- there is no material difference in under-claiming behaviour across age groups;
- there is no difference in under-claiming behaviour related to gender;
- under-claiming is markedly more common among those who immigrated to Canada.
- under-claiming falls as educational attainment increases.

Table 13 summarizes these data.

Table 13: Under-Claiming of WorkSafeBC Benefits by Demographic Characteristics Percent of Respondents who Reported Two or More Days of Lost Working Time (Age, Gender, Immigration Status, Educational Attainment) (n=404)

	Total	No. of Respondents Not Claiming WorkSafeBC Benefits	Under-Claiming: Percent Did Not Apply
Age			
18-34	140	72	51.4%
35-54	206	114	55.3%
55+	58	31	53.4%
Total	404	217	53.7%
Gender			

	Total	No. of Respondents Not Claiming WorkSafeBC Benefits	Under-Claiming: Percent Did Not Apply
Men	242	130	53.7%
Women	162	87	53.7%
Total	404	217	53.7%
Immigration Status			
Born in Canada	157	62	39.5%
Immigrated to Canada	241	150	62.% ←
Don't Know	6	5	83.3%
Total	404	217	53.7%
Educational Attainment			
High school or less	100	66	66.0%
Trade qualifications	59	42	71.2%
Some college/technical school or college/technical school graduate	110	51	46.4%
Some university or university graduate	134	57	42.5%
Don't Know	1	1	100.0%
Total	404	217	53.7%

Employment circumstances clearly affect the likelihood of a worker under-claiming:

- Under-claiming is markedly more common among workers who are not union members, although under-claiming is still frequent among union members.

- Employees of small employers are more likely to under-claim than employees of larger companies. Those who work for employers with 10 or fewer employees are highly likely to under-claim (79.3%).
- Temporary employees (81.5%) are much more likely to under-claim than permanent employees. Workers employed by temporary agencies (80.0%) are also more likely to under-claim.

Table 14 summarizes these data.

Table 14: Under-Claiming of WorkSafeBC Benefits by Demographic Characteristics Percent of Respondents who Reported Two or More Days of Lost Working Time Union Status, Employer Size, Employment Status (n=404)

	Total	No. of Respondents Not Claiming WorkSafeBC Benefits	Under-Claiming: Percent Did Not Apply
Union Status			
Union member at time of Injury	137	50	36.50%
Not a union member at time of injury	262	163	62.2% ←
Don't Know	5	4	80.00%
Total	404	217	53.70%
Employer Size			
Fewer than 10	87	69	79.3% ←
10 to 24	86	52	60.5%
25 to 99	83	44	53.0%
100 to 499	80	26	32.5%
500 or more	49	17	34.7%
Don't Know	19	9	47.4%

	Total	No. of Respondents Not Claiming WorkSafeBC Benefits	Under-Claiming: Percent Did Not Apply
Total	404	217	53.7%
Employment Status			
A permanent employee	292	127	43.5%
A temporary, term or casual employee	81	66	81.5% ←
Working for a temporary help agency	10	8	80.% ←
Other	20	16	80.0%
Don't Know	1	0	0.0%
Total	404	217	53.7%

Reasons for Under-Claiming WorkSafeBC Wage Loss Benefits

Among those survey respondents who did not apply for WorkSafeBC benefits, but who reported losing two or more days of working time, approximately a quarter (26.7%) received wage continuation from their employer or through a sick leave plan.

Table 15: No Application for WorkSafeBC Benefits Despite Lost Working Time of Two Days or More Received or Did Not Receive Ad Hoc Wage Continuation or Sick Leave Benefits (n=217)

	No.	Percent
Wages Continued	58	26.7%←
Wages Not Continued	130	59.8%
Don't Know	8	3.7%
Not Applicable	21	9.7%
Total	217	100.0%

Table 16 summarizes the reasons given for not applying for WorkSafeBC wage loss benefits by respondents who reported that they did not apply for those benefits and also reported that they lost two or more days of working time. As in previous tables, two-day threshold was chosen to exclude incidents that respondents might have regarded insufficiently serious to warrant submitting a claim and also to avoid situations where respondents might include the day of the incident as a day of lost working time. (Note that notwithstanding this qualifier in the sub-sample, 10 respondents nevertheless reported that they did not lose any working time).

Table 16: Reasons for Not Applying for WorkSafeBC Wage Loss Benefits Despite Lost Working Time of Two Days or More (Multiple Responses Permitted. Column Cannot be Summed) (n=217)

	Reason for Not Applying for WorkSafeBC Wage Loss Benefits	No.	Percent of Sub-Set (n=217)	Percent of Total Sample (n=699)
	Lack of Knowledge			
A	I did not know I was entitled to WorkSafeBC wage loss benefits	62	28.6%	8.9%
B	I did not know how to apply for WorkSafeBC wage loss benefits	36	16.6%	5.2%
	Either A or B	87	40.1% ←	12.4%
C	My employer told me I was not eligible for WorkSafeBC wage loss benefits	15	6.9%	2.1%
	Not Worth Time			
D	It was not worth the trouble to apply for WorkSafeBC wage loss benefits	44	20.3%	6.3%
E	Minor injury/ not a serious injury	1	0.5%	0.1%
F	My employer or my sick leave plan paid my wages while I was off work	38	17.5%	5.4%
	Any of the Above (D, E or F)	78	35.9%	11.2%

	Reason for Not Applying for WorkSafeBC Wage Loss Benefits	No.	Percent of Sub-Set (n=217)	Percent of Total Sample (n=699)
	Real or Perceived Inducements or Pressure not to Claim			
G	I thought I would get into trouble if I reported my injury to WorkSafeBC	17	7.8%	2.4%
H	My employer pressured me not to apply for WorkSafeBC benefits	9	4.1%	1.3%
	Either G or H	26	11.9% ←	3.7% ←
J	My fellow employees encouraged me not to apply for WorkSafeBC benefits because they feared they would lose a bonus	7	3.2%	1.0%
	Other			
K	I did not lose time from work	10	4.6%	1.4%
L	Self employed	5	2.3%	0.7%
M	Don't qualify	3	1.4%	0.4%
N	Don't Know	5	2.3%	0.7%
P	Other mentions	7	3.2%	1.0%
P	None of the above	17	7.8%	2.4%

Table 16 suggests a number of observations:

- The most important reason for under-claiming was lack of knowledge or misinformation about entitlement or how to apply. Of respondents who lost two or more days of working time, 40.1% indicated a lack of information on their entitlement or on how to apply for benefits.

- Somewhat more than a third (35.9%) of respondents who lost two or more days of working time did not believe it was worth their time to apply for wage loss benefits for one reason or another. This may have reflected a disinclination to deal with government bureaucracy, preference for using a sick leave plan (if that was available and permitted), or a sense that the injury did not justify making a claim.
- The survey data indicate that 26 respondents did not apply for WorkSafeBC benefits because of real or perceived pressure not to claim. This was 3.7% of the total sample (n=699) and 11.9% of the sub-sample of respondents who reported losing two or more days from work and not applying for benefits. For an additional 7 respondents the pressure not to apply for benefits was from fellow employees who were fearful of losing a bonus if the respondent submitted a WorkSafeBC claim. On some interpretations, these 7 observations could be included as claim suppression because a bonus program creates an obvious incentive for employees to discourage a fellow employee from submitting a claim.

Table 16 suggests a possible indicator of the incidence of real or perceived claim suppression. As noted above, 26 respondents who had lost two or more days of working time reported real or perceived claim suppression behaviour on the part of their employer. These 26 survey respondents represented 3.7% of the total sample of 699 persons.

Workers More Likely to Report Pressure or Inducement Not to Report Time Loss or Claim Wage Loss Benefits

Survey participants were asked the following questions:

- a) Did your employer ask you not to report the time loss?
- b) Did your employer threaten you with repercussions if you submitted a claim or report to WorkSafeBC?

It should be noted that these questions were asked separately from the question about why individuals did not claim a WorkSafeBC benefit. Individuals could have responded affirmatively to any of the above questions, but still claimed a benefit.

Table 17 summarizes the responses to the above questions.

Table 17: No. of Respondents Reporting that Their Employer Requested Them Not to Report Time loss or Threatened Them with a Repercussion for Submitting a Claim or Report (n=699)

	No.	Percent
Employer asked you not to report the time loss	76	10.9%
Threatened you with repercussions if you submitted a claim or report to WorkSafeBC	53	7.6%
Both Threat and Request	38	5.4%
Either Threat or Request	91	13.0%←

For the purpose of analyzing which types of workers are more likely to perceive pressure not to submit a wage-loss WorkSafeBC claim, this report will use the subset of 91 respondents identified in Table 17. This represented 13.0% of the total sample of 699 respondents. Table 16 shows the percentages of these respondents, based on various demographic characteristics that perceived pressure not to submit a WorkSafeBC claim. A percentage that is materially above 13.0%, indicates a higher risk that persons in this group may be subject to such pressure.

Table 18: Percent of Respondents in with Specific Demographic Characteristics Reporting that Their Employer Requested Them Not to Report Time loss or Pressured Them Not to Submit a WorkSafeBC Claim (n= 699)

	Total in Sample	Percent Reporting Pressure
Total Sample	699	13.0%
Gender		
Male	416	14.4%
Female	283	11.0%
Age		
18-34	248	16.9%←

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	Total in Sample	Percent Reporting Pressure
35-54	346	11.6%
55+	105	8.6%
Educational Attainment		
High school or less	174	12.6%
Trade qualifications	105	12.4%
Some college/technical school or college/technical school graduate	192	9.4%
Some university or university graduate	225	16.9%←
Don't Know	--	--
Immigration Status		
I was born in Canada	269	15.6%
I immigrated to Canada	420	10.7%
Don't Know	10	40.0%
First Language		
English	368	16.6%
Other	328	8.8%
Don't Know	--	--
Union or Non-Union		
Union Member	231	14.7%
Not a Union Member	459	11.8%

	Total in Sample	Percent Reporting Pressure
Don't Know	9	33.3%
Employment Status		
A permanent employee	477	13.6%
A temporary, term or casual employee	160	13.1%
Working for a temporary help agency	14	21.4% ←
Other	45	4.4%
Don't Know	--	--
Full-Time / Part-Time		
Full time (30 hours or more per week)	547	13.9%
Part time (less than 30 hours per week)	151	9.9%
Don't Know	--	--

Some of the findings in Table 18 may be viewed as counterintuitive. For example, it would not be expected that persons with post-secondary qualifications would be more likely to experience employer pressure or that women would report less pressure. Nor would it be expected that those whose first language is not English or who were born outside of Canada would be less likely to experience such pressure. Two other findings, however, may be more aligned with expected findings:

- Younger workers (18-34) are more likely to report pressure than older workers.
- Persons working for a temporary help agency are markedly more likely to report employer pressure.

Table 19 shows the same likelihood of respondents to the worker survey reporting perceived pressure from their employer, by industry in which they were employed. Industries for which there were five (5) or fewer observations have been omitted. Again, a percentage that is appreciably greater than 13.0% indicates a higher

likelihood of employer pressure being reported. Conversely, a percentage that is appreciably less than 13.0% indicates a much lower likelihood.

Table 19: Percent of Respondents in Industries Reporting that Their Employer Requested Them Not to Report Time loss or Pressured Them Not to Submit a WorkSafeBC Claim (n= 699)

	Industry Total	% of Respondents Reporting Pressure
All Industries Average	699	13.0%
Forestry or logging	11	18.2%←
Other primary industries excl forestry or logging	14	35.7%←
Utilities	31	12.9%
Construction	119	12.6%
Manufacturing	41	19.5%←
Wholesale or retail trade	92	6.5%
Transportation	51	19.6%←
Broadcasting, cultural and information industries	11	54.5%←
Finance and insurance	22	27.3%←
Accommodation and food service	61	14.8%
Other private sector services	43	16.3%
Government - municipal, provincial or federal	33	3.0%←
Health care or social services	58	13.8%
Education	25	4.0%←
Other	84	3.6%

While it may be expected, it is nevertheless notable that respondents employed in Education or Government reported exceptionally low likelihood of being pressured. Above average likelihoods of perceived pressure were reported in:

- Forestry and Logging (18.2%)*
- Other Primary Industries (35.7%)*
- Manufacturing (19.5%)
- Transportation (19.6%)
- Broadcasting, Cultural and Information Industries (54.5%)*, and
- Finance and Insurance (27.3%).

For some of these industries (denoted with an asterisk), it should be noted that the sample size is small, and no strong conclusions should be drawn.

Under-Claiming WorkSafeBC Medical Benefits

Table No. 20 summarizes the reasons given by respondents for not applying for WorkSafeBC medical benefits.

Table 20: Reasons for Not Applying for WorkSafeBC Medical Benefits (Multiple Responses Permitted. Column Cannot be Summed) (n=461)

	Reason for Not Applying for WorkSafeBC Medical Benefits	No.	Percent of Sub-Set (n=461)	Percent of Total Sample (n=699)
	Lack of Knowledge			
A	I did not know I was entitled to WorkSafeBC wage loss benefits	82	17.80%	11.7%
B	I did not know how to apply for WorkSafeBC wage loss benefits	48	10.40%	6.9%
	Either A or B	114	24.7%←	16.3%
C	My employer told me I was not eligible for WorkSafeBC wage loss benefits	24	5.20%	3.4%
	Not Worth Time			
D	It was not worth the trouble to apply for WorkSafeBC wage loss benefits	95	20.6%←	13.6%
	Alternative Benefit Source			

ESTIMATES OF THE NATURE AND EXTENT OF CLAIM SUPPRESSION IN BRITISH
COLUMBIA'S WORKERS COMPENSATION SYSTEM

	Reason for Not Applying for WorkSafeBC Medical Benefits	No.	Percent of Sub-Set (n=461)	Percent of Total Sample (n=699)
E	The B.C. Medical Services Plan covered the costs	54	11.70%	7.7%
F	My employer or my benefit plan covered my medical expenses	72	15.60%	10.3%
G	My expenses were covered by the benefit plan of my partner, spouse or other family member	20	4.3%	2.9%
	Any of the Above (E, F or G)	133	28.9%←	19.0%
	Real or Perceived Inducements or Pressure not to Claim			
H	I thought I would get into trouble if I reported my injury to WorkSafeBC	34	34	7.4%
I	My employer pressured me not to apply for WorkSafeBC benefits	16	16	3.5%
	Either H or I	44	9.5%←	6.3%
J	My fellow employees encouraged me not to apply for WorkSafeBC benefits because they feared they would lose a bonus	12	12	2.6%
	Other			
K	Did not need any benefits	2	2	0.4%
L	Other mentions	3	3	0.7%
M	Don't Know	14	14	3.0%
N	None of these reasons	46	46	10.0%

The most frequently offered reason for not applying for WorkSafeBC medical benefits was an alternative benefit source (28.9%). These included: the B.C. Medical

Services Plan, an employer or other benefit plan or a spouse, partner or other family member’s benefit plan. The second most common reason for not applying for medical benefits was lack of knowledge (24.7%). One in five respondents (20.6%) did not believe that applying for benefits was worth their time. Roughly one in ten respondents (9.5%) indicated real or perceived pressure or inducement not to seek benefits.

Financial Losses

Somewhat more than a quarter (28.5%) of the respondents to the survey reported that they had suffered a financial loss as a result of their work-related injury or disease. Table 21 shows that 20% of those who did not apply for WorkSafeBC benefits experienced a financial loss.

Table 21: Number of Respondents Reporting a Financial Loss as Result of Their Work-Related Injury or Disease (n=699)

	No.	Percent of Total Sample	Percent of Sub-Set
Applied for WorkSafe BC Benefits			
Financial Loss	104	14.90%	45.00%
No Financial Loss	122	17.50%	52.80%
Don't Know	5	0.70%	2.20%
Sub-Total	231	33.0%	100.0%
Did Not Apply for WorkSafeBC Benefits			
Financial Loss	92	13.2%	20.0%
No Financial Loss	349	49.9%	75.7%
Don't Know	20	2.9%	4.3%
Sub-Total	461	66.0%	100.0%
Don't Know If Applied for WorkSafeBC Benefits			
Financial Loss	--	--	--

	No.	Percent of Total Sample	Percent of Sub-Set
No Financial Loss	--	--	--
Don't Know	--	--	--
Sub-Total	7	1.0%	100.0%
Total	699	100.0%	

Of the 199 respondents who reported incurring a financial loss, 135 provided an estimate of that loss. These data are summarized in Table 22.

Table 22: Amount of Financial Loss Reported (n=135)

	Applied for WorkSafeBC Benefits	Did Not Apply for WorkSafeBC Benefits	Don't Know if Applied for WorkSafeBC Benefits	Total
\$1 to \$500	22	43	2	67
\$501 to \$1,000	7	10 ←	0	17
>\$,1000	33	18 ←	0	51
Total	62	71	2	135

Of the 461 respondents who did not apply for WorkSafeBC benefits, 28 (6.1%) reported a financial loss of more than \$500. Of the 91 respondents that reported employer claim suppression (See Table 17), 20 reported financial losses of more than \$500.

Reporting Injury to Employer or Doctor

Just under three-quarters (73.2%) of respondents indicated that they reported their injury to their employer. Of those who reported claim suppression behaviour on the part of their employer (per Table 17), a greater proportion (86.8%) indicated that they had advised their employer of their injury.

Table 23: Reporting Injury to Employer (n=699)

	No Real or Perceived Employer Claim Suppression		Real or Perceived Employer Claim Suppression		Total	
	No.	Percent	No.	Percent	No.	Percent
Report Injury to Employer	433	71.2%	79	86.8%	512	73.2%←
Did Not Report Injury to Employer	161	26.5%	11	12.1%	172	24.6%
Don't Know	--	--	--	--	15	2.1%
Total	608	100.0%	91	100.0%	699	100.0%

Assistance in Making a WorkSafeBC Claim

Of the 231 respondents who indicated that they were union members, only 69 (29.9%) reported that their union assisted them in submitting a WorkSafeBC claim. A larger number of union members (109) reported that their employer assisted. Table 24 shows that employers were more likely to assist an employee in submitting a WorkSafeBC claim if the employee was a union member. Nevertheless, it is perhaps notable that only a minority (36.8%) of employers appear to have assisted their employee in submitting a claim.

Table 24: Employer Assistance in Submitting a WorkSafeBC Claim (n=699)

	Union Member		Not a Union Member		Don't Know if a Union Member		Total	
	No.	Percent	No.	Percent	No.	Percent	No.	Percent
Employer Assisted in Submitting WorkSafeBC Claim	109	47.2%←	145	31.6%	--	--	257	36.8%
Employer Did Not Assist in	112	48.5%	281	61.2%	--	--	395	56.5%

	Union Member		Not a Union Member		Don't Know if a Union Member		Total	
	No.	Percent	No.	Percent	No.	Percent	No.	Percent
Submitting WorkSafeBC Claim								
Don't Know if Employer Assisted	10	4.3%	33	7.2%	--	--	47	6.7%
Total	231	100.0%	459	100.0%	9	100.0%	699	100.0%

Employer Submission of Injury Report

Employees are not necessarily aware of whether their employer submitted the required report (Form 7) to WorkSafeBC. In this survey only 27.8% of respondents indicated that they were aware that a report had been submitted. It is notable that workers in the survey were more likely to report that they had received WorkSafeBC benefits (wage loss or medical) if their employer had submitted a Form 7.

Table 25: Employer Submission of Form 7 and Worker's Receipt of Benefits (Wage Loss and/or Medical) (n=699)

	Worker Reports that Employer Submitted Form 7		Worker Reports that Employer Did Not Submit Form 7 Aware		Worker Does Not Know if Employer Submitted Form 7		Total	
	No.	Percent	No.	Percent	No.	Percent	No.	Percent
Received WorkSafeBC Benefits	140	72.2% ↑	19	5.4%	38	24.7%	197	28.2%
Did Not Receive WorkSafeBC Benefits	54	27.8%	332	94.6% ↑	116	75.3%	502	71.8%

Total	194	100.0 %	351	100.0 %	154	100.0 %	699	100.0 %
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As can be seen in Table 25, if the employer did not submit a Form 7 (per the employee’s understanding), the likelihood of the worker receiving benefits was extremely low (5.4%). Conversely, if the employer did submit a Form 7, the likelihood that the worker received a benefit was extremely high (72.2%). The inference from these findings is that when employers support a worker’s claim by submitting a Form 7 (and not filing an objection), workers are more likely to proceed with a claim and receive benefits whereas when an employer does not file a Form 7 (and thereby suggests that they might oppose the claim or sanction the worker), a high percentage of workers chose to forego WorkSafeBC benefits to which they would likely have been entitled.

Employer Incentive Systems for Maintaining an Accident-Free Workplace

Some employers operate bonus or reward systems for maintaining an accident-free workplace. The mandate of this report does not extend to considering the degree to which these incentive systems encourage more safety-conscious behaviour on the part of employees or discourage, as a result of group pressure, individual reporting of injuries. Table 26 shows that overall, 10.9% of the survey respondents worked for an employer that offered monetary or other rewards for maintaining an accident-free workplace. It is notable that employers that engaged in claim suppression behaviour (according to the survey respondents) were markedly more likely to operate these incentive schemes: 40.7% of employers whom survey respondents described as engaging in claim suppression behaviour operated incentive schemes compared to 6.4% of employers whom survey respondents did not describe as engaging in this behaviour. This may suggest a need for guidelines or standards on such schemes.

Table 26: Employer Claim Suppression and Employer Monetary or Other Rewards for Maintaining an Accident-Free Workplace (n=699)

	Employer Asked Employee Not to Submit Report or Threatened Repercussions					
	Yes		No		Total	
	No.	Percent	No.	Percent	No.	Percent
Did employer offer monetary or other rewards	37	40.7%	39	6.4%	76	10.9%
Did employer offer monetary or other rewards for maintaining an accident-free workplace	45	49.5%	517	85.0%	562	80.4%
Offered Monetary or Other Rewards	9	9.9%	52	8.6%	61	8.7%
Did Not Offer Monetary or Other Rewards	91	100.0%	608	100.0%	699	100.0%
Don't Know	9	9.9%	52	8.6%	61	8.7%
Total	91	100.0%	608	100.0%	699	100.0%

Incidence of Real or Perceived Claim Suppression

Four separate procedures suggest estimates of the incidence of real or perceived claim suppression on the part of employers.

The first procedure draws on Table 17 which showed that 91 respondents reported that their employer asked them not report time loss and/or threatened them with repercussions if they did so. These 91 respondents were 13.0% of the overall sample of 699 persons. This is the highest estimate of claim suppression behaviour, although it includes instances where the worker nevertheless submitted a claim for benefits.

The second procedure modifies the first by counting only those respondents who did not apply for WorkSafeBC benefits as a result of their employer's pressure. These 36

individuals, whose claim was likely suppressed, represent 5.2% of the overall sample of 699 persons. (See Table 27).

Table 27: Respondents Who Applied for WorkSafeBC Benefits Notwithstanding that Their Employer Requested Them Not to Submit a Report and/or Threatened Repercussions for Doing So (n=91)

	No.	Percent
Did you apply for any WorkSafeBC benefits as a result of your injury?		
Yes Applied.	52	57.1%
No. Did not apply.	36	39.6%
Don't Know	3	3.3%
Total	91	100.0%

The third procedure adjusts the first procedure by counting only the 31 respondents who reported that their employer asked them not report time loss and/or threatened them with repercussions if they did so and who explicitly did not receive assistance from their employer in submitting a WorkSafeBC claim. (See Table 28, below.) These 31 respondents represent 4.4% of the total sample of 699 persons. The coincidence of a respondent reporting both claim suppression behaviour on the part of their employer and assistance from that same employer in submitting a claim might be considered paradoxical. However, the person who discouraged the claim could have been a different individual from the person who provided the assistance in submitting a claim. For example, e a front-line supervisor might discourage reporting an incident because this could reflect poorly on him or her while a staff person in human resources nevertheless provides the employee with assistance in submitting the claim. By assisting an employee in submitting a claim, an employer has a measure of influence in how the incident is described.

Table 28 shows that this situation may not be uncommon.

Table 28: Employer Claim Suppression vs. Assisting Employee Submit a WorkSafe BC Claim (n=699)

	Employer Asked Employee Not to Submit Report or Threatened Repercussions					
	Yes		No		Total	
	No.	Percent	No.	Percent	No.	Percent
Employer Assisted in Submitting Claim	53	58.2%	204	33.6%	257	36.8%
Employer Did Not Assist in Submitting Claim	31 ←	34.1%	364	59.9%	395	56.5%
Don't Know	7	7.7%	40	6.6%	47	6.7%
Total	91	100.0%	608	100.0%	699	100.0%

Table 28 shows that in a majority (58.2%) of the cases where survey respondents reported claim suppression behaviour on the part of their employer, the respondents also reported that their employer assisted them in submitting a WorkSafeBC claim.

A fourth procedure for estimating the incidence of claim suppression draws on Table 16. This table shows that 26 respondents lost two or more days of working time and also reported that they did not apply for WorkSafeBC benefits because either they thought they would 'get into trouble' and/or their employer 'pressured' them not to apply. These 26 respondents represent 3.7% of the total sample of 699 persons.

Finally, a fifth procedure adds to the above 26 respondents a further 5 respondents who reported that they chose not to apply for benefits because of pressure from fellow employees who feared losing a bonus. It can be argued that such bonus schemes knowingly encourage employees to pressure other workers not to submit WorkSafeBC claims. These 31 respondents represent 4.4% of the total sample. (Note: there were 7 respondents who reported pressure from fellow employees, but 2 of these respondents also reported that they thought they would 'get into trouble' and/or their employer 'pressured' them not to apply).

The foregoing results do not support a definitive interpretation of the incidence of claim suppression behaviour. They do, however, suggest a range of plausible

estimates from 3.7% of the sample to 13.0%, with estimates towards the lower end being more likely.

All of the estimates need to be qualified by a number of cautions. A survey respondent's perception may reflect a misunderstanding on his or her part. The respondents' recollections may be inaccurate. Either the injury or the respondent may not have been covered by WorkSafeBC. And finally, the sample was deliberately structured to over-represent some industries with higher incidence rates. Notwithstanding these cautions, the survey data nevertheless suggest that claim suppression behaviour is a problem for B.C.'s workers compensation system, although lack of knowledge of entitlements or how to claim benefits is clearly a more significant factor in determining the overall level of under-claiming.

2. Employer survey

Introduction

The purpose of this survey is to obtain insight into employers' policies and practices related to reporting work-related injuries or diseases and employers' perceptions of the policies and practices of other employers in their industry. The survey was conducted by telephone in two waves. The first wave (n=100) was stratified across all industries based approximately on their share of reported WorkSafeBC claims. The second wave (n=50) generated additional sample for the construction industry and the transportation and warehousing industry. These industries were chosen because of their comparatively higher claims incidence. The first wave was administered in February 2020. The second wave was administered in March of 2020. A large majority of these interviews were administered prior to most organizations shifting to remote work as a precaution against Covid-19. Some interviews were administered on March 24th and 25th when remote working was the norm. There is no reason to believe that either the randomness of the sample or the quality of the responses was affected by the shift to remote working. The surveys were typically answered by a human resources manager or, in the case of small enterprises, the owner-operator.

When interpreting the results of the Employer Survey, it should be noted that percentages refer to the percentage of employers in the survey and that this

percentage is not weighted to reflect differences in the size of employers in the sample. As a result, a finding that a certain percentage of employers believe that firms in their industry rarely or never report time loss injuries to WorkSafeBC does not mean that the same percentage of workers would be at risk of this type of employer conduct.

Key Findings

Almost three-quarters of employers (72.0% of the respondents) provided either or both of a sick leave/disability plan or medical benefits plan. This includes employers whose workers have access to a medical benefits plan through their union. Roughly a fifth of these employers (21.3%, representing 15.3% of the total sample) allow their employees to access benefits through one of these plans instead of claiming WorkSafeBC benefits.

Roughly 6.0% of employers reported their belief that, in their industry, time loss injuries are 'rarely or never' reported to WorkSafeBC. More than a quarter of employers in the survey reported their belief that, in their industry, time loss injuries are reported to WorkSafeBC as no time loss injuries 'all the time or almost all the time.'

Part I: Overview of Sample

Distribution of Sample by Industry

Table 29 summarizes the distribution of the sample across industries and by employer size, where size refers to the respondents' estimation of their peak employment.

Table 29: Distribution of Sample by Industry and Peak Employment (n=150)

		No. of Employees (Peak)					
NAICS	Industry	<20	20 to 99	100 to 500	>500	Total	Percent
11	Agriculture and Resources	2	0	2	0	4	2.7%
31 to 33	Manufacturing	4	6	3	1	14	9.3%

		No. of Employees (Peak)					
NAICS	Industry	<20	20 to 99	100 to 500	>500	Total	Percent
23	Construction	24	11	7	0	42	28.0%
48 to 49	Transportation & Warehousing	14	13	5	1	33	22.0%
44 to 45	Retail and Wholesale Trade	1	3	6	1	11	7.3%
72	Accommodation, Food & Leisure	5	3	3	0	11	7.3%
81	Other Private Services	12	2	1	0	15	10.0%
92	Governments	1	1	2	0	4	2.7%
62	Health Care & Social Services	3	1	6	1	11	7.3%
61	Education	4	0	0	0	4	2.7%
	Not Specified					1	0.7%
	Total	70	40	35	4	150	100.0%
		46.7%	26.7%	23.3%	2.7%	100.0%	

A large majority of respondents (122 = 81.3%) described their business or organization as offering steady work throughout the year. The remainder characterized their operations as seasonal.

Overall, 37 (24.7%) employers indicated that some of their employees were members of a union.

Appendix I to this Section compares the distribution of the sample by industry with the distribution of accepted claims by WorkSafeBC and the distribution of the sample, by employer size, with the distribution in the B.C. economy.

Role of Temporary or Seasonal Staff / Use of Temporary Staffing Agencies

Somewhat more than a third (58=38.7%) of employers indicated that they augment their workforce by hiring temporary or seasonal workers, where temporary or seasonal means that employees are formally hired for a period of less than 6 months. Table 30 shows that, for most of these employers (46/58), more than 10% of their workforce is temporary or seasonal.

Table 30: Role of Temporary or Seasonal Workers in Work Force (n=150)

Percent of Workforce that is Temporary or Seasonal	No.	Percent
0%	88	58.70
Unspecified	4	2.7%
Sub-Total*	92	61.4%
<10%	12	8.0%
11% to 20%	21	14.0%
21% to 50%	12	8.0%
>50%	13	8.7%
Sub-Total*	58	38.7% ←
	150	100.0%

*Sub-totals do not sum to 100.0% owing to rounding.

Of the 58 employers who indicated that they hire temporary or seasonal workers, 20 (13.3% of the sample of 150) reported that they used a temporary staffing agency.

Most employers (130 = 86.7%) reported that they directly recruit and hire temporary or seasonal employees. Twenty employers indicated that they sometimes use staffing agencies to supply temporary or seasonal workers. Five employers indicated that a temporary staffing agency supplies 10% or more of their work force.

Responsibility for OHS Policy and Submitting WorkSafeBC Claims and Reports

Table 31 shows that the vast majority of employers in the survey (136 = 91.3%), and almost all employers with 20 or more employees, reported that “an executive or staff

person” is responsible for developing and administering occupational health and safety (OHS) policy, overseeing related training and maintaining relevant records.

Table 31: Person Who Is Responsible for Developing and Administering their Workplace Health and Safety Policy, Overseeing Any Necessary Training and Maintaining Relevant Records (n=149)

	Peak Employment									
	<20		20 to 99		100 to 500		>500		Total	
	No.	Percent	No.	Percent	No.	Percent	No.	Percent	No.	Percent
An executive or staff person	60	85.7%	39	97.5%	33	94.3%	4	100.0%	136	91.3%
A consultant	2	2.9%	1	2.5%	2	5.7%	0	0.0%	5	3.4%
Don't know	5	7.1%	0	0.0%	0	0.0%	0	0.0%	5	3.4%
Declined to Answer	3	4.3%	0	0.0%	0	0.0%	0	0.0%	3	2.0%
Total	70	100.0%	40	100.0%	35	100.0%	4	100.0%	149	100.0%

Table 32: Person Who Is Responsible for filing WorkSafeBC claims and incident reports (n=149)

	Peak Employment									
	<20		20 to 99		100 to 500		>500		Total	
	No.	Percent	No.	Percent	No.	Percent	No.	Percent	No.	Percent
An executive or staff person	57	81.40%	38	95.00%	25	71.40%	4	100.00%	124	83.2%
A consultant	3	4.30%	1	2.50%	9	25.7%	0	0.00%	13	8.7%
Don't know	7	10.00%	1	2.50%	1	2.90%	0	0.00%	9	6.0%
Declined to Answer	3	4.30%	0	0.00%	0	0.00%	0	0.00%	3	2.0%
Total	70	100.00%	40	100.00%	35	100.00%	4	100.00%	149	100.0%

While only 5 employers reported using a consultant to design and administer their OHS policy, 13 employers indicated that they use a consultant to file WorkSafeBC claims and incident reports. The use of third-party claims managers was more common in the 100-to-500 employee category where 9 out of 35 employers reported using a consultant.

Part II: Under-Claiming, Claim Misrepresentation and Claim Suppression

Possible Role of Benefits Plans in Under-Claiming WorkSafeBC Benefits

Approximately half (53.0%) of employers indicated that they have a sick leave plan or disability plan that pays some or all of a worker's wages when he or she is off work for health reasons. Among small employers (fewer than 20 employees), however, the incidence of sick leave plans is much lower (27.1%).

Table 33: No. of Employers that Have Sick Leave Plans or Disability Plans that Pay Some or All of a Worker's Wages When He or She is Off Work for Health Reasons (n=149)

	Peak Employment									
	<20		20 to 99		100 to 500		>500		Total	
	No.	Percent	No.	Percent	No.	Percent	No.	Percent	No.	Percent
Have a Sick Leave Plan or Disability Plan	19	27.1% ←	25	62.5%	25	62.5%	4	100.0%	79	53.0%
Do NOT have a Sick Leave Plan or Disability Plan	50	71.4%	13	32.5%	13	32.5%	0	0.0%	67	45.0%
Don't know	1	1.4%	2	5.0%	2	5.0%	0	0.0%	3	2.0%
Total	70	100.0%	40	100.0%	40	100.0%	4	100.0%	149	100.0%

Table 34 shows that a somewhat larger proportion of employers (61.7%) have a health benefit plan that covers some or all of their employees' medical expenses or, alternatively, their employees have access to such a plan through their union.

Table 34: No. of Employers that Have Health Benefit Plan (or Whose Employees Access a Health Benefit Plan through Their Union) that Pay Some or All of a Worker's Medical Expenses (n=149)

	Peak Employment									
	<20		20 to 99		100 to 500		>500		Total	
	No.	Percent	No.	Percent	No.	Percent	No.	Percent	No.	Percent
Have a Health Benefit Plan	29	41.40%	30	75.0%	30	85.7%	3	75.0%	92	61.7% ←
Health Benefit Plan Provided Through Union	3	4.3%	2	5.0%	2	5.7%	0	0.0%	7	4.7%
Do NOT have a Health Benefit Plan	36	51.4%	6	15.0%	1	2.9%	0	0.0%	43	28.9%
Don't know or Declined to Answer	2	2.9%	2	5.0%	2	5.7%	1	25.0%	7	4.7%
Total	70	100.0%	40	100.0%	35	100.0%	4	100.0%	149	100.0%

Overall, 107 employers (71.3%) provide either or both of a sick leave/disability plan or medical benefits plan, including those employers whose workers had access to a medical benefits plan through their union. Table No. 35 shows that 23 employers allow employees to access benefits through a plan instead of claiming WorkSafeBC benefits. The 23 employers were 21.5% of the sub-set of employers that provide either or both of a sick leave/disability plan or medical benefits plan and 15.3% of the total sample which includes employers that do not provide such plans.

Table 35: Employers that Provide a Medical Benefits and/or Sick Leave/Disability Plan AND Allow Employees to Access Benefits through these Plans in Place of WorkSafeBC Benefits (n=107)

	No.	Percent of Subset (n=107)	Percent of Total Sample (n=150)
Allow Employees to Use Sick Leave/Disability and/or Medical Benefits Plans in place of WorkSafeBC Benefits	23	21.5%	15.3%
Do NOT Allow Employees to Use Sick Leave/Disability and/or Medical Benefits Plans in place of WorkSafeBC Benefits	56	52.3%	37.3%
Don't Know	27	25.2%	18.0%
Declined to Answer	1	0.9%	0.7%
Sub-Total	107	100.0%	71.3%
Not Applicable (i.e., Employer does not provide a Medical Benefits and/or Sick Leave/Disability Plan)	43		28.7%
Total	150		100.0%

Although sample sizes by industry are small (see Table 29), it may be notable that in transportation and warehousing, for which the total sample was 33, there were 24 employers that reported operating a sick leave/disability plan or medical benefits plan. Half (12) of these employers permitted employees to access benefits through a plan instead of claiming WorkSafeBC benefits. In construction, there were 42 employers in the survey sample, of which 27 reported providing a plan or that their

employees had access to a union plan. Of these 27 employers, only 4 indicated that they permit their employees to access benefits through a plan in place of WorkSafeBC entitlements. Three of these four construction employers were non-union.

Of the 107 employers that provided a sick leave/disability plan or medical benefits plan, including those employers whose workers had access to a medical benefits plan through their union, 33 were unionized. Six of these employers (18.2%) allowed their employees to access benefits under these plans in place of WorkSafeBC benefits. For non-union employers, the corresponding percentage was 23.0%. The survey data suggest, therefore, that the use of benefit plans is likely contributing to under-claiming of WorkSafeBC benefits and perhaps under-reporting of work-related injuries or diseases. Employers may not know if an employee has accessed health benefits. However, employers definitely know if an employee has accessed sick leave.

Bonus Incentives to Maintain a Safe Workplace

Table 36 shows that some employers (16 = 10.7%) provide a bonus or incentive to

Table 36: No. of Employers that Provide a Bonus or Incentive to Maintain and Accident-Free Workplace (n=150)

	No.	Percent
Provide a Bonus or Incentive	16	10.7%←
Do NOT Provide a Bonus or Incentive	133	88.7%
Don't Know or Declined to Answer	1	0.7%
Total	150	100.0%

These types of bonus incentives appear to be somewhat more common in unionized workplaces. Of the 37 unionized employers, 7 (18.9%) operate bonuses or incentives for accident-free workplaces. By contrast only 9 of the 112 non-union employers operate bonuses or incentives.

There is no evidence from the survey data that bonuses, or incentives are associated with using third-party claims managers. Of the 13 employers that use a third-party claims manager, only 1 reported operating a bonus or incentive scheme.

Perceptions of Claim Suppression and Misrepresentation of Time Loss Claims

Survey participants were asked to share their perceptions about their industry in respect of three hypothetical situations:

- 1) when a worker experiences a work-related injury that does not involve missed work beyond the day of injury, how often do you believe this injury is reported to WorkSafeBC? [No Time Loss Injury / Non-Reporting]
- 2) when a worker experiences a work-related injury that does involve some missed work beyond the day of injury, how often do you believe this injury is reported to WorkSafeBC? [Time Loss Injury / Non-Reporting]
- 3) when a worker experiences a work-related injury that involves some missed worked beyond the day of injury, how often do you believe this injury is reported as a no time loss injury to WorkSafeBC with lost wages being covered by a sick leave plan or ad hoc wage continuation? [Time Loss Injury / Misrepresentation as No Time Loss Claim]

Table 37 summarizes the survey data. In this table, attention is directed to those respondents who answered “sometimes” or “rarely or never” to questions about claim suppression (columns 1 and 2) and to those respondents who answered “all the time or almost all the time” to the question about time loss injury claim misrepresentation (column 3).

Table 37: Perceptions of Claim Suppression/Under-Claiming and Claim Misrepresentation (n=150)

	No time loss Injury/ Non-Reporting ⁷		Time Loss Injury/ Non-Reporting ⁸		Time Loss Injury / Misrepresentation as No Time Loss Claim ⁹	
	No.	Percent	No.	Percent	No.	Percent
All the time or almost all the time	47	31.3%	98	65.3%	40	26.7%←
Often, but not always	31	20.7%	22	14.7%	20	13.3%
Sub-Total	77	52.0%	120	80.0%	60	40.0%
Sometimes	30	20.0%←	17	11.3%←	28	18.7%
Rarely or Never	38	25.3%←	9	6.0%←	45	30.0%
Don't Know or Declined to Answer	4	2.7%	4	2.7%	17	11.3%
Total	150	100.00%	150	100.0%	150	100.0%

⁷ Survey Question: “Thinking generally about your industry, and not about your company or organization, when a worker experiences a work-related injury that does not involve missed work beyond the day of injury, how often do you believe this injury is reported to WorkSafeBC?”

⁸ Survey Question: “Thinking generally about your industry, and not about your company or organization, when a worker experiences a work-related injury that does involve some missed work beyond the day of injury, how often do you believe this injury is reported to WorkSafeBC?”

⁹ Survey Question: “Thinking generally about your industry, and not about your company or organization, when a worker experiences a work-related injury that involves some missed worked beyond the day of injury, how often do you believe this injury is reported as a no-lost-time injury to WorkSafeBC with lost wages being covered by a sick leave plan or ad hoc wage continuation?”

As can be seen from Table 37, there is a widespread perception among survey respondents that many time loss injuries are not reported to WorkSafeBC or are misrepresented as no time loss incidents:

- A quarter (25.3%) of respondents expressed their belief that no time loss injuries were “rarely or never” reported to WorkSafeBC. A further 20% of respondents indicated that this “sometimes” occurs.
- A much smaller proportion of survey respondents (6.0%) indicated their belief that time loss injuries were “rarely or never” reported to WorkSafeBC, although a larger proportion (11.3%) indicated that they believed that this “sometimes” happens.
- Misrepresentation of time loss incidents as no time loss incidents is perceived to occur “all the time or almost all the time” by 26.7% of respondents.

Table 38 shows that the reported perception of Time Loss Injury Suppression or Under-Claiming is above 10% in most sectors (averaging 17.3%), but not in health care and social services and manufacturing.

Table 38: Perceptions by Industry of Claim Suppression/Under-Claiming and Claim Misrepresentation (n=150)

		Time Loss Injury Reported All the Time or Almost All the Time	Time Loss Injury Reported Often, but Not Always	Time Loss Injury Reported Sometimes	Time Loss Injury Reported Rarely or Never	Don't Know	Total	Percent Suggesting Time Loss Injuries are Reported "Sometimes" or "Rarely or Never"
11	Agriculture and Resources	3	0	1	0	0	4	*
31 to 33	Manufacturing	11	2	1	0	0	14	7.1%
23	Construction	28	7	5	0	2	42	11.9%
48 to 49	Transportation & Warehousing	21	4	5	2	1	33	21.2%
44 to 45	Retail and Wholesale Trade	9	0	1	1	1	12	16.7%
72	Accommodation, Food & Leisure	5	4	1	1	0	11	18.2%
81	Other Private Services	6	5	1	3	0	15	26.7%
92	Governments	3	0	1	0	0	4	*
62	Health Care & Social Services	11	0	0	0	0	11	0.0%

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		Time Loss Injury Reported All the Time or Almost All the Time	Time Loss Injury Reported Often, but Not Always	Time Loss Injury Reported Sometimes	Time Loss Injury Reported Rarely or Never	Don't Know	Total	Percent Suggesting Time Loss Injuries are Reported "Sometimes" or "Rarely or Never"
61	Education	1	0	1	2	0	4	*
	Total	98	22	17	9	4	150	17.3%

*too few observations to make percentage meaningful

It is important to stress when interpreting the data in Table 37 and Table 38 that the responses pertain to perceptions of claim suppression and claim misrepresentation and not necessarily to actual knowledge of incidents. These perceptions about competitors' behaviour could be exaggerated or, to a significant degree, unfounded. Nevertheless, the data in Table 37 and Table 38 do suggest that many employers believe that a significant proportion of work-related injuries are not reported to WorkSafeBC.

Appendix I: Stratification of Sample

Table 39 compares the distribution of the sample, by industry, with the distribution of WorkSafeBC claims in 2018.

Table 39: Comparison of Survey Sample and Distribution of WorkSafeBC Claim (2018)

		Sample		WorkSafeBC Claims (2018)	
		No.	Percent	No.	Percent
11	Agriculture and Resources	4	2.7%	4,440	4.2%
31 to 33	Manufacturing	14	9.3%	14,493	13.7%
23	Construction	42	28.0%	18,216	17.2%
48 to 49	Transportation & Warehousing	33	22.0%	8,207	7.7%
44 to 45	Retail and Wholesale Trade	11	7.3%	12,596	11.9%
72	Accommodation, Food & Leisure	11	7.3%	11,120	10.5%
81	Other Private Services	15	10.0%	16,508	15.6%
92	Governments	4	2.7%	4,035	3.8%
62	Health Care & Social Services	11	7.3%	11,994	11.3%
61	Education	4	2.7%	4,500	4.2%
	Not Specified	1	0.7%		0.0%
	Total	150	100.0%	106,109	100.0%

Two industries - construction and transportation & warehousing were deliberately over-sampled because these industries have higher claims rates.

Table 40 compares the distribution of the sample by employer size with the distribution of employment in B.C. by establishment size. Note that ‘establishment’

and 'employer' are not identical as an employer can have more than one establishment.

Table 40: Comparison of Survey Sample and Distribution of Employer Size

No. of Employees	Sample		Employment by Establishment Size (2019) Statistics Canada: Table: 14-10-0068-01	
	Number	Percent	Employees (1,000s)	Percent
<20	70	46.7%	778.3	37.0%
20 to 99	40	26.7%	746.2	35.5%
100 to 500	35	23.3%	383.2	18.2%
>500	4	2.7%	194.5	9.3%
Total	150	100.0%	2,102.20	100.0%

3. Analysis of Accepted No Time Loss Claims

Introduction

The purpose of this analysis was to estimate the risk that claims accepted by WorkSafeBC as No Time Loss Claims, i.e., Medical Care Only, actually entailed lost working time. Employers may have an interest in misrepresenting a Time Loss claim as a No Time Loss claim because the latter is less likely to have an adverse impact on experience rating or the likelihood of an inspection. Such misrepresentation of claims may or may not be associated with inducements or threats to get the worker to “play along”. Claim suppression can only be asserted when the misrepresentation of claims is deliberate on the part of an employer and the worker is subject to inducements or threats to support the misrepresentation.¹⁰

An incident that involved lost working time could be incorrectly reported as a No Time Loss claim because the worker preferred to access lost earnings benefits through a sick leave plan or some other source or simply did not want to go through the process of claiming lost earnings benefits. Claim suppression, therefore, is not equivalent to under-claiming, but pertains to only those instances of under-claiming where inducements or threats also came into play.

In general, it is impossible to draw a definitive conclusion from the file record. For this reason, the analysis in this report focuses on anomalies which are strongly suggestive of claim misclassification, but which cannot be interpreted as definitively finding that misclassification necessarily occurred. Moreover, as noted above, this misclassification – if it were confirmed – could have an explanation that is unrelated to any deliberate claim misrepresentation by employers.

¹⁰ Recall that in this report we define claim suppression as any overt or subtle actions by an employer or its agent which have the purpose of discouraging a worker from reporting a work-related injury or disease or claiming WorkSafeBC benefits to which he or she would likely be entitled. In the absence of inducement or pressure not to report an incident to WorkSafeBC or not to claim an earnings replacement benefit, under-reporting and under-claiming alone do not constitute claim suppression

The findings of the analysis which follows, therefore, should be interpreted as estimates or indicators of the risk of under-claiming and misclassification. Deliberate claim misrepresentation or claim suppression would be a sub-set of these risk files. The magnitude of this sub-set, in relation to the size of the overall pool of risk files, cannot be inferred from file evidence alone.

File Records

A total of 1,043 files was sampled. Table 41 summarizes the files included in the sample.

Table 41: Forms included in Sample of Files

	Frequency	Percent of Total Sample
Form 6 - Workers Application for Compensation and Report of Injury or Occupational Disease	697	66.8%
Form 7 - Employer's Report of Injury or Occupational Disease	419	40.2%
Form 8 - Physician's First Report	739	70.9%
Form 11 - Condition or Treatment Changed	63	6.0%
Form 83D218 and Form 83D363 - Physiotherapy Initial Report and Secondary Assessment	90	8.6%
Form 83D346 - Physiotherapy Hospital Report	0	0.0%
Form 8C - Chiropractor's Report	33	3.2%
Form 8C Beyond Four Weeks Chiropractor's Report	5	0.5%
Form 83D397 - Chiropractor's Supplementary Report	0	0.0%
Form 10DF - Psychology Assessment Report	0	0.0%
Form 10D6 - Mental Health Treatment Report	0	0.0%
Form 3 - Opioid Prescription Report	0	0.0%

In principle, each file should include a Form 6 and a Form 7 in each file, although the presence of both forms is not necessary for a claim to be processed. However, a claim will be processed if there is either a Form 6 or Form 7, along with a Form 8. Table 42 shows the incidence of these forms in the sample of files:

Table 42: Form 6 (Worker’s Application/Report) and Form 7 (Employer’s Report)

	Frequency	Percent of Total Sample
Form 6 Only	402	38.5%
Form 7 Only	124	11.9%
Form 6 and Form 7	295	28.3%←
Neither Form 6 nor Form 7	222	21.3%
Total	1,043	100.0%

It should be noted that only a minority of files (28.3%) had both a Form 6 and a Form 7.

The absence of a Form 6 or Form 7 might be interpreted as an anomaly that could indicate a risk that the claim is being misclassified or misrepresented as a No time loss claim. However, only 28.3% of files in the sample contained both a Form 6 and a Form 7. The absence of either or both of these forms is too widespread, therefore, to be a useful indicator of misclassification risk.

Risk Flags

The following Risk Flags were defined:

Table 43: Risk Flags Defined

Risk Flag	Description	Rationale
Flag 1	Form 6 States Worker Missed Work beyond Day of Incident	This is prima facie evidence suggesting a likelihood of time loss. It is possible, however, that a worker included non-scheduled workdays as missed working time. While strongly indicative of the likelihood lost working time, this Risk Flag should not be interpreted as definitive.
Flag 2	Difference between Return-to-Work and Incident per Form 6 is Greater than 2 Days	Form 6 asks the worker to indicate both the date of the incident and the date of his or her return to work. A difference of more than two days excludes weekends. Other scheduled days off, however, may also apply. Most Form 6s, it should be noted do not include information on both the date of the incident and the date of return to work. While strongly indicative of the likelihood lost working time, this Risk Flag should not be interpreted as definitive.
Flag 3	Physician's First Report (Form 8) indicates	A physician's initial assessment that the worker will be able to return to work

Risk Flag	Description	Rationale
	Estimated Return-to-Work is Greater than Six Days.	only after a period of six days or more is strongly suggestive of lost working time. However, the physician may have over-estimated the period of incapacity or the worker may not have followed physician advice. While strongly indicative of the likelihood lost working time, this Risk Flag should not be interpreted as definitive.
Flag 4	Physiotherapy Reports (Forms 83D218 and/or 83D363) indicate Worker does NOT have Functional Ability to Perform Modified or Regular Duties	A physiotherapist's report indicating an inability to perform either regular or modified duties is strongly suggestive of lost working time. However, the employer may have been able to accommodate the worker. While strongly indicative of the likelihood lost working time, this Risk Flag should not be interpreted as definitive.
Flag 5	Chiropractor's Report (Form 8C) indicated that the Estimated Return-to-Work is Greater than Six Days	A chiropractor's assessment that the worker will be able to return to work only after a period of six days or more is strongly suggestive of lost working time. However, the chiropractor may have over-estimated the period of incapacity or the worker may not have followed

Risk Flag	Description	Rationale
		chiropractor's advice. The employer may also have been able to accommodate the worker with modified duties. While strongly indicative of the likelihood lost working time, this Risk Flag should not be interpreted as definitive.
Flag 6	Evidence of Lost Earnings Benefit Received or Pursued from a Health Plan, EI, CPP, other WCB, etc.	Receipt or Pursuit of Lost Earning Benefits from another benefit plan (private or statutory) is clearly and definitively indicative of lost working time. Although the worker may not be financially disadvantaged, from a health and safety surveillance perspective (although not from an administrative perspective), treating the claim as no time loss would be erroneous. Pursuing lost earnings benefits from a health plan, EI or CPP may or may not be indicative of under-claiming and may or may not be indicative of deliberate claim misrepresentation.

Risk flag 1: Form 6 states worker missed work beyond day of incident

Of the 1,043 files, 35 files contained Form 6s that explicitly indicated time loss beyond the day of the incident. This is 3.4% of the sample.

Risk flag 2: Difference between return-to-work and incident per form 6 is greater than 2 days

Form 6 requests the worker to indicate the date of the incident and the date of his or her return to work. While information on the date of the incident was available in all files, information on the return-to-work date was provided in only 24 of the files. We cannot offer a reason as to why only 24 files should have information on return-to-work date. This may reflect the fact that the claims were submitted as Medical Benefits Only/No Time Loss and information on return-to-work was deemed extraneous.

Table 44 summarizes the difference (measured in days) between the date of the incident and the date of the return to work.

Table 44: Analysis of Form 6s Indicating Both Date of Incident and Date of Return-to-Work

Days between Date of Incident and Date of Return-to-Work	Frequency
0 to 2 Days	10
3 Days or More	14
Total	24

Of the 24 files with information on both the date of the incident and the date of the return-to-work, 14 reported a difference of more than two days. This would exclude weekends and therefore provides a more conservative estimate of the risk of lost working time. However, it should be noted that some workers may have more than two days between regularly scheduled working days.

Risk Flag No. 1 and Risk Flag No. 2 potentially overlap. Table 45 shows the coincidence between these two indicators.

Table 45: Coincidence between Risk Flag 1 and Risk Flag 2

Risk Flag Incidence	Frequency
Risk Flag 1 Only: Form 6 States Worker Missed Work Beyond Date of Incident	29

Risk Flag 2 Only: Difference between Return-to-Work and Incident per Form 6 is Greater than 2 Days	8
Both Risk Flags	6
Total	43

If Risk Flag 1 and Risk Flag 2 are combined, the number of files where there is a suggestion of lost working time increases to 43 which is 4.1% of the sample.

Risk Flag 3: Physician's First Report (Form 8) indicates Estimated Return-to-Work is Greater than Six Days

Of the 739 Form 8s in the sampled files, 82 indicated an estimated Return-to-Work that was greater than six days. It should be noted that this is six days from the physician's examination which may or may not have been the date of the incident. Table 46 summarizes these data. Of the 312 Form 8's that indicated an expected Return-to-Work date, 82 placed this at more than six days. This is 7.9% of the sampled files. Moreover, it should be noted that some of the 230 files in which the physician's report indicated expected return-to-work after 1-6 days would likely include some files in which the expected return-to-work was more than two days, thereby excluding weekends.

Table 46: Estimated Time before Worker will be able to Return to Work (From Form 8s)

Estimated Days before Worker will be able to Return to Work	Frequency	Percent of Total Sample (n=1,043)
1-6 days	230	22.1%
7-13 days	56	5.4%
14-20 days	15	1.4%←
>20 days	11	1.1%←
Total	312	29.9%

It is certainly notable that in 2.5% of the files, the expected return to work is more than two weeks from the date of the incident.

Risk Flag 4: Physiotherapy Reports (Forms 83D218 and/or 83D363) indicate Worker does NOT have Functional Ability to Perform Modified or Regular Duties

As noted in Table 41, there were 90 physio-therapy reports (Forms 83D218 and/or 83D363). Of these, nine indicated that the worker did not have the functional ability to perform modified or regular duties.

Risk Flag 5: Chiropractor’s Report (Form 8C) indicated that the Estimated Return-to-Work is Greater than Six Days.

There were 33 Form 8Cs in the sampled files. Of these, four indicated an estimated Return-to-Work greater than six days from the date the worker was examined.

Coincidence of Medical Reports

Risk Flags 3, 4 and 5 are not necessarily additive since the worker may have been examined by more than one medical practitioner. In this sample, however, only one file displayed two of these risk flags. The total number of files with at least one of Risk Flag 3, 4 or 5 was 94. This is 9.0% of the total sample.

Consistency of Severity of Injury with NTL Status of Claim

Table 47 summarizes the nature of the injury reported in the Form 6s.

Table 47: Nature of Injury from Form 6s

	Frequency	Percent
Abrasion	69	6.6%
Back Strain	113	10.8%
Chemical Burns	6	0.6%
Concussion	11	1.1%
Contusion	127	12.2%
Fractures	28	2.7%
Hearing Loss	5	0.50%

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Heat Burns	21	2.0%
Laceration	316	30.3%
Multiple Injuries	8	0.8%
Other Injuries	15	1.4%
Other Strains	287	27.5%
Respiratory Inflammation	6	0.6%
Tendinitis, Tenosynovitis	7	0.7%
Other (including Asbestosis, Bursitis and Related, Dislocation, Electrocutation, Exposure to Heat, Hernia, Infectious Disease, Poisoning and Stress	14	
Unknown Mapped Code	10	1.0%
Total	1,043	100.0%

No strong conclusions can be drawn the data in Table 47. However, some of the reported injuries are more likely to be associated with lost working time. For example, it seems improbable that all of the persons reporting back strain (113) or concussion (11) or fractures (28) were able to return to work the next day.

A total of 381 Form 6s (36.5%) indicate that the worker sought medical attention following the injury. However, no strong conclusions can be drawn from these data which are summarized in Table 48.

Table 48: Type of Medical Attention following Injury from Form 6s (Multiple Answers Permitted)

Go to Hospital	250
Go to Clinic	70
Go to Physician	197
Go to Other Practitioner	14
None of the Above	1

The WorkSafeBC claim review team were asked whether, based on the description of the injury in Forms 6 and 7 and the related medical reports, the reviewer believed that the injury was consistent with no time loss. Table 49 shows that the reviewers had reservations about 54 of the files (5.2%). The reviewers also concluded that in a fifth of the files (21.1%), there was insufficient information or other ambiguities which made it impractical to proffer an opinion as to whether the injury as described in the file was consistent with no lost working time.

Table 49: WorkSafeBC’s Researchers’ Assessment of Whether the Injury as Described in the File was Consistent with No time loss

	Whether the Injury as Described in the File was Consistent with No time loss	
	Frequency	Percent of Sample
No	5 ←	.5%←
Likely No	49 ←	4.7%←
Likely Yes	695	66.6%
Yes	74	7.1%%
Uncertain or Insufficient information	220	21.1%
Total	1043	100

Risk Flag 6 Evidence of Lost Earnings Benefit Received or Pursued from a Health Plan, EI, CPP, other WCB, etc.

The WorkSafeBC Review Team also noted that 10 of the files indicated that the worker was receiving lost earning benefits from an employer’s sick leave plan, EI, CPP or another worker’s compensation system. This likely indicates that the incident involved lost working time.

Overall Assessment of Risk of Claim Misclassification

Table 50 summarizes the incidence of the Risk Flags

Table 50: Incidence of Risk Flags

Risk Flag	Description	Incidence	Percent of Total Sample
Flag 1	Form 6 States Worker Missed Work beyond Day of Incident	35	3.4%
Flag 2	Difference between Return-to-Work and Incident per Form 6 is Greater than 2 Days	14	1.3%
	Either Flag 1 or Flag 2	43	4.1% ←
Flag 3	Physician's First Report (Form 8) indicates Estimated Return-to-Work is Greater than Six Says.	82	7.9%
Flag 4	Physiotherapy Reports (Forms 83D218 and/or 83D363) indicate Worker does NOT have Functional Ability to Perform Modified or Regular Duties	9	0.9%
Flag 5	Chiropractor's Report (Form 8C) indicated that the Estimated Return-to-Work is Greater than Six Days	4	0.4%
	Any of Flag 3, 4 or 5	94	9.0% ←
Flag 6	Evidence of Lost Earnings Benefit Received or Pursued from a Health Plan, EI, CPP, other WCB, etc.	10	1.0%
	Any Risk Flag	126	12.1% ←
	Two or More Risk Flags	14	1.3%

The above incidence of Risk Flags can be compared to the WorkSafeBC claim review team's assessment of the files. The members of the claim review team were asked to provide an assessment as to whether "based on your review of the description of the injury or disease in Form 6, 7 and the relevant medical reports was the nature of the injury or disease consistent with no time loss?" The reviewers

indicated that they had reservations about 54 of the files. As noted in Table 49, this was 5.2% of the total sample.

As noted at the beginning of this Section, it is not feasible to draw a definitive conclusion from the file evidence that claim which involved lost working time was misrepresented to WorkSafeBC as a no time loss claim. It is feasible, however, to identify anomalies in the files which are suggestive of a risk of misclassification. This is the intent of the various Risk Flags.

Based on the analysis of the sample, the lower boundary estimate of the risk of misclassification is 4.1%. This is based on the combination of Risk Flags 1 and 2. The lower boundary estimate is somewhat less than the assessment of the WorkSafeBC claim review team (5.2%). The upper boundary estimate is 12.1%. This is based on the presence of any Risk Flag. If medical reports alone were relied on, the risk estimate would be approximately intermediate between the upper and lower boundaries: 9.0% (any of Risk Flag 3, 4 or 5). It should be kept in mind, however, that some medical practitioners may have recommended time off work not knowing that the employer would offer modified work arrangements. Reliance on medical reports to estimate the risk of lost work time could therefore result in an over-estimation of this risk. Notwithstanding these qualifications, the results of the analysis presented in this Section indicate that there is a relevant risk that somewhere between 4.1% and 12.1% of accepted no time loss claims actually pertained to incidents that involved lost working time.

4. Analysis of Rejected, Suspended and Abandoned Time Loss Claims

Introduction

The purpose of this analysis is to investigate whether there are any indicia in rejected or abandoned time loss claim files suggesting that a worker may have been improperly pressured to withdraw a claim or to refrain from necessary interactions with WorkSafeBC that would have enabled WorkSafeBC to proceed with evaluating the claim.

There is no suggestion in this report that WorkSafeBC acted improperly in not proceeding with the claims under review. Indeed, it would have been contrary to WorkSafeBC's regulatory mandate to have proceeded with a claim despite the worker's expressed desire not to proceed or the absence of necessary supporting information. The focus of the analysis in this report is not whether WorkSafeBC should have proceeded with the claim. Rather the purpose of the analysis is to ascertain whether the file records indicate a risk that a worker did not proceed with a Time Loss claim that, on its face, was likely valid, and whether this decision not to proceed may have been the result of improper pressure from his or her employer.

Files indicating a risk that a claim was likely valid, even though the worker did not proceed with the claim, can be characterized as 'problematic'. The fact that a file is 'problematic' does not necessarily imply that the worker's decision not to proceed with the claim was the result of undue pressure from his or her employer or fellow workers (who may fear losing a group bonus). A worker could decide not to proceed with a claim for reasons that are unrelated to improper pressure. These might include, among other reasons: language barriers, not knowing how to process a claim, aversion to bureaucracy, access to essentially equivalent benefits under a sick leave plan, or acknowledgement that the injury was not work-related (and therefore not valid). Underclaiming, therefore, should not be equated with claim suppression, although claim suppression may be a factor in some instances of underclaiming.

The findings presented in this report show that a significant proportion of rejected or abandoned Time Loss claims appear to be 'problematic'. For most of these 'problematic' files, it is not possible to identify the factors which may have contributed

to the worker’s decision to abandon the claim. In some cases, however, there are indicia which suggest of a risk of claim suppression.

File Records

A total of 601 rejected or abandoned claim files was sampled. Table 51 summarizes the status of the files included in the sample.

Table 51: Status of Sampled Files (n=601)

	Frequency	Percent
Suspended	493	82.0%
Rejected	43	7.2%
No adjudication required	65	10.8%
Total	601	100.0%

Of the 601 claim files, 288 included file notes that provide more information on the rationale for classifying the claim as ‘suspended’, ‘rejected’ or ‘no adjudication required’. It should be noted, however, that these 288 files may not be representative of the reasons for classifying files as the presence of file notes may not be random. Subject to this qualification, Table 52 summarizes the reasons for classifying a claim as ‘suspended’, ‘rejected’ or ‘no adjudication required’, based on the file notes.

Table 52: Status of Sample Files compared with Explanatory Notes in Files (n=288)

	Claim Eligibility Status							
	No Adjudication Required		Rejected		Suspended		Total	
	#	% (n=288)	#	% (n=288)	#	% (n=288)	#	% (n=288)
Lack necessary information; No contact with worker; Worker failed to	0	0.0%	0	0.0%	136	47.2%	136	47.2% ←

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	Claim Eligibility Status							
	No Adjudication Required		Rejected		Suspended		Total	
	#	% (n=288)	#	% (n=288)	#	% (n=288)	#	% (n=288)
Worker withdrew or suspended claim	15	5.2%	0	0.0%	46	16.0%	61	21.2% ←
Claim not Covered	4	1.4%	10	3.5%	1	0.3%	15	5.2% ←
Worker is Represented*	32	11.1%	0	0.0%	0	0.0%	32	11.1%
Claim commenced in error	1	0.3%	1	0.3%	0	0.0%	2	0.7%
Unknown	2	0.7%	0	0.0%	2	0.7%	4	1.4%
Pursuing ICBC Claim	0	0.0%	0	0.0%	2	0.7%	2	0.7% ←
Pursuing Lawsuit or Other Channel	1	0.3%	0	0.0%	1	0.3%	2	0.7% ←
Claim Suspended or Provisional (Probably lacks information)	10	3.5%	0	0.0%	3	1.0%	13	4.5% ←
No Election Filed	0	0.0%	0	0.0%	21	7.3%	21	7.3%
Total	65	22.6%	11	3.8%	212	73.6%	288	100.0%

*A worker who is represented by a union representative, lawyer or para-legal is presumed to be acting on qualified advice.

As can be seen in Table 52, almost half (47.2%) of claims, for which there were file notes, were suspended because of a lack of necessary information, because the worker could not be contacted, or because the worker did not respond to a request for further information. A further 4.5% of claims were set aside or suspended because there was likely information required. Voluntary withdrawal of claims accounted for 21.2% of the claims with file notes. Only 5.2% of the claims with file notes applied to circumstances that were not covered by WorkSafeBC, while 1.4% of files indicated that the worker was pursuing compensation through the Insurance

Corporation of British Columbia (ICBC) (0.7%) or another channel, such as a lawsuit (0.7%). File notes indicated that in 11.1% of the sampled cases, the worker was represented.

Consideration was given to adjusting the sample to exclude files for which the file notes support a presumption that the claim was abandoned or rejected for appropriate reasons. This option was rejected for three reasons. First, the objective of the study is to estimate the risk of claim suppression in the overall universe of claims. This implies that properly rejected or abandoned claims should be included in the denominator. Second, as noted earlier, the presence of file notes may not be random. Claims officers may have differed in their propensity to add explanatory notes to the files. Third, the number of claims with file notes supporting a presumption that the claim was abandoned or rejected for appropriate reasons is not sufficiently large to affect the overall results. For all of these reasons, the analysis which follows uses the full sample of 601 files, except where specifically noted.

Forms Missing from the Claims

In principle, a valid claim for lost-working time should include a Form 6 (Worker’s Application for Compensation and Report of Injury), a Form 7 (Employer’s Report of Injury or Occupational Disease) and a Medical Report. Although a Form 7 is not required to proceed with a claim, an employer is required to submit a Form 7. Table 53 summarizes the presence of WorkSafeBC Forms in the sampled files.

Table 53: Forms included in Sampled Files (n=601)

	Frequency	Percent
Form 6 - Workers Application for Compensation and Report of Injury or Occupational Disease	250	41.6%
Form 7 - Employer's Report of Injury or Occupational Disease	477	79.4%
Form 8 - Physician's First Report	111	18.5%
Form 11 - Condition or Treatment Changed	39	6.5%
Form 83D218 - Physiotherapy Standard Treatment Initial Report	9	1.5%
Form 83D363 - Physiotherapy Secondary Assessment	0	0.0%

	Frequency	Percent
Form 83D346 - Physiotherapy Hospital Report	0	0.0%
Form 8C - Chiropractor's Report	5	0.8%
Form 8C Beyond Four Weeks Chiropractor's Report	0	0.0%
Form 83D397 - Chiropractor's Supplementary Report	0	0.0%
Form 10DF - Psychology Assessment Report	0	0.0%
Form 10D6 - Mental Health Treatment Report	0	0.0%
Form 3 - Opioid Prescription Report	0	0.0%

As can be seen from Table 53, 250 (41.6%) of the files contained a Form 6 (Worker's Application for Compensation). A Form 8 (Physician's First Report) was found in 18.5% of the files.

Table 54 shows the concurrence of Forms 6 and 7.

Table 54: Form 6 (Worker's Application/Report) and/or Form 7 (Employer's Report) (n=601)

	Frequency	Percent of Adjusted Sample
Form 6 Only	108	18.0%
Form 7 Only	335	55.7%
Form 6 and Form 7	142	23.6%
Neither Form 6 nor Form 7	16	2.7%
Total	601	100.0%

Nature of Indicated Injury

Data on the nature of the worker's injury may be derived from Form 6, Form 7, medical reports and file notes. This information appears to have been available for all files. Table 55 summarizes these data.

Table 55: Nature of Worker's Injury (n=601)

	Frequency	Percent
Strains, not elsewhere classified	349	58.1%
Contusion	62	10.3%
Back Strain	62	10.3%
Stress	51	8.5%
Other: including bursitis and related, carpal tunnel syndrome, chemical burns, fractures, hearing loss, heat burns and poisoning	16	2.7%
Laceration	15	2.5%
Infectious Disease	14	2.3%
Tendinitis, Tenosynovitis	9	1.5%
Abrasion	8	1.3%
Concussion	8	1.3%
Respiratory Inflammation	7	1.2%
Total	601	100.0%

No clear-cut conclusions can be drawn from these data about the severity of the injury.

Risk Flags

The following Risk Flags were defined:

Table 56: Risk Flags Defined

Risk Flag	Description	Rationale and Interpretation
Flag 1	Form 6 States Worker Missed Work beyond Day of Incident AND Sought Medical Attention	This Risk Flag identifies files for which there is <i>prima facie</i> evidence suggesting a likelihood of time loss and justifying a characterization of the file as 'problematic'. The worker's response in seeking medical attention (hospital, clinic or physician) is consistent with an injury of some seriousness that may be associated with lost working time.
Flag 2	Form 6 States Worker Missed Work beyond Day of Incident AND Sought Medical Attention BUT There is No Form 7	This Risk Flag identifies files for which, in addition to the <i>prima facie</i> indication in the file that there was likely compensable time loss, there was also the questionable absence of a Form 7. This suggests that the files are not only 'problematic' but that there may be a risk of improper pressure not to proceed with a claim.
Flag 3	Form 7 and Form 6 Concur that Worker Missed Work beyond Day of Incident	This Risk Flag identifies problematic files. It is somewhat puzzling that a claim in which the Form 7 concurs with the Form 6 that there was lost working time did not proceed.
Flag 4	Form 7 is Received Two Weeks or Later After Receipt of Form 6	An employer is required to submit a Form 7 within three (3) days of the incident or injury. Administrative negligence may account for some delay beyond three (3) days. However, delays beyond two weeks suggest that the employer may have applied inappropriate pressure on the worker not to proceed with the claim. Files identified by this Risk Flag are both 'problematic' and suggestive of a risk of improper pressure not to proceed. This Risk Flag, however, should not be treated as a definitive indicator as the employer may have been unaware

Risk Flag	Description	Rationale and Interpretation
		of the incident because the worker did not report it to the employer.
Flag 5	Employer Objections Do Not Appear to be Consistent with the Circumstances of the Injury or Disease	Employer objections that appear inconsistent with the circumstances of the injury or disease are suggestive of a risk of claim suppression. Employers have the right to object to a claim. These objections can be well founded. However, unfounded objections implicitly hint at the possibility of reprisals. The need for the worker to obtain and supply additional information could also discourage some workers from proceeding with a claim if they have an aversion to bureaucracy or have difficulty navigating administrative procedures. Unfounded objections may or may not be accompanied by overt claim suppression. When the objection, on its face, does not appear to be consistent with the circumstances of the injury or disease, there is a risk that improper pressure may have been applied.
Flag 6	Evidence of Lost Earnings Benefit Received or Pursued from a Health Plan.	Receipt or pursuit of lost earnings benefits from a private health plan is clearly and definitively indicative of lost working time. There is potentially claim suppression when an employer knowingly allows these benefits to be paid under a sick leave plan.

Risk Flag 1: Form 6 States Worker Missed Work beyond Day of Incident AND Sought Medical Attention

Of the 601 claim files in the sample, 250 (41.6%) contained Form 6s. More than 80% (209) of these Form 6s indicated that the worker was off work beyond the date of the incident. It is also noteworthy that 141 of these Form 6s indicated that the worker reported both missing work and going to a hospital, clinic or physician as a result of the incident. In more than half of these files (77/141), the file also indicated that there was a witness to the incident. Some of the files (29) contained file notes indicating

that the injury or worker was not covered, the worker was represented, or the worker was also pursuing an ICBC or other legal claim. To estimate the number of problematic files, these 29 files should be excluded. Table 57 summarizes these data.

Table 57: Lost Working Time and Medical Attention Indicated on Form 6s (N=601)

	Frequency	Percent of Adjusted Sample
Claims Files with a Form 6 Present	250	41.60%
Form 6 Indicated Worker Time loss Beyond the Date of the Incident	209	34.8%
Form 6 Indicated Worker Time loss Beyond the Date of the Incident AND Sought Medical Attention from a Hospital, Clinic or Physician	141	23.5%
Form 6 Indicated Worker Time loss Beyond the Date of the Incident AND Sought Medical Attention from a Hospital, Clinic or Physician EXCLUDING Files with notes indicating: Not Covered, Worker Represented or Pursuing ICBC or Other Legal Claim	112 ←	18.6%←
Form 6 Indicated Worker Time loss Beyond the Date of the Incident AND Sought Medical Attention from a Hospital, Clinic or Physician AND There Was a Witness to the Incident EXCLUDING Files with notes indicating: Not Covered, Worker Represented or Pursuing ICBC or Other Legal Claim	71	11.80%

As can be seen from Table 57, after excluding the 29 files where there is no reason to suspect inappropriate employer pressure, there are 112 files that could be considered problematic. In each of these cases, the Form 6 indicated lost working time and also that the worker sought medical attention from a hospital, clinic or physician. Seeking medical attention from a hospital, clinic or physician is consistent

with reporting lost working time. These 112 files represent 18.6% of the total sample. Risk Flag No. 1, therefore, suggests that 18.6% of the files in the sample of 601 files could be considered as potentially problematic. If one adds the additional test of whether there was a witness, the number of potentially problematic files falls to 71 (11.8%).

Risk Flag 2: Form 6 States Worker Missed Work beyond Day of Incident AND Sought Medical Attention BUT There is No Form 7

The absence of a Form 7 may reflect administrative negligence on the part of an employer, a belief that the worker was not covered or the injury was not related to the workplace, or lack of knowledge of the incident because the worker did not report the incident to the employer. On the other hand, the absence of a Form 7 may also suggest an intention to discourage the worker from proceeding with the claim. It is important, however, to be cautious in drawing such an inference in the absence of any other supporting indicators.

Table 58 shows that in almost half of the files (44.6%) where the Form 6 indicated lost working time and medical attention, the Form 7 was absent. At a minimum, this represents puzzling employer behaviour. While there may be a valid explanation for the failure to submit a Form 7, the absence of a Form 7 in these circumstances also may indicate an intention to discourage the claim.

Table 58: Presence or Absence of Form 7 in Claim Files with a Form 6 Indicating Time loss and Medical Attention

	Frequency	Percent n=601
Form 6 Indicates Missed Work and Medical Attention		
Form 7 Present	71	11.8%
Form 7 Absent	70	11.6%
Form 7 Absent EXCLUDING Files with notes indicating: Not Covered, Worker Represented or Pursuing ICBC or Other Legal Claim	50	8.3%

Risk Flag No. 2, therefore, suggests that 50 files could be considered both potentially problematic and moderately suggestive of a risk that the employer intended to discourage the worker from proceeding with the claim. These 50 files represent 8.3% of the total sample of 601 files.

Risk flag 3: Form 7 and form 6 concur that worker missed work beyond day of incident

Both Form 6 and Form 7 ask whether the work missed work beyond the day of the incident. A concurrence of Form 6 and Form 7 on this question, in principle, should indicate a claim that is likely valid. Table 59 summarizes the concurrence of these Forms 6s and Form 7s on whether the worker missed work beyond the day of the incident.

Table 59: Form 6 and Form 7 Both Indicate Time loss

	Frequency	Percent of (n=601)
File contains both Form 6 and Form 7	142	23.6%
Form 6 and Form 7 Concur: Worker Missed Work beyond Day of Incident	104	17.3%
Concurrence Ratio	73.2%	
Form 6 and Form 7 Concur: Worker Missed Work beyond Day of Incident EXCLUDING Files with notes indicating: Not Covered, Worker Represented or Pursuing ICBC or Other Legal Claim	93	15.5%

As can be seen from Table 59, where both a Form 6 and a Form 7 were filed, there is a concurrence ratio of 73.2% that the worker missed time beyond the date of the incident. These 104 files represent 17.3% of the total sample of 601 files. In 11 of these files there was a note indicating that the workers were represented or were pursuing a claim through ICBC or another channel. If these files are excluded, the number of problematic files becomes 93. This is 15.5% of the sample of 601 files. It is puzzling that none of these 93 files proceeded notwithstanding that that Form 6 and Form 7 concur that the worker missed work time beyond the date of the incident.

Risk Flag No. 3, therefore, suggests that 15.5% of the files in the total sample could be considered problematic.

Risk Flag 4: Form 7 was Received Two Weeks or Later After Receipt of Form 6

There were 142 claims files which recorded the date of receipt for both the Form 6 and the Form 7. Both Form 6 and Form 7 should be submitted at approximately the same time. An employer is required to file a Form 7 within three (3) days of the incident or injury. Table 60 summarizes the data on the delay between receipt of Form 7 and Form 6.

Table 60: Delay between Receipt of Form 6 and Receipt of Form 7

	Frequency	Percent of Subset (n=142)	Percent of Sample (n=601)
Form 7 Received before Form 6	76	53.5%	12.6%
Form 7 and Form 6 Received Same Day	18	12.7%	3.0%
Form 7 Received within Two Weeks after Form 6	30	21.1%	5.0%
Form 7 Received more than Two Weeks after Form 6	18	12.7%	3.0%
	142	100.0%	23.6%

Table 60 indicates that in 18 files the Form 7 was received more than two weeks after the Form 6. It is possible that this delay can be explained by administrative negligence or the employer not being aware of the incident. The delay could also indicate that the employer intended to discourage the worker from proceeding with the claim. No clear-cut conclusion can be drawn from the delay. However, where the Form 7 is submitted more than two weeks after the Form 6, it is reasonable to regard the file as problematic. These 18 files represented 3.0% of the total sample of 601 files.

Risk Flag No. 4 suggests, therefore, that 3.0% of rejected or abandoned Time Loss files could be viewed as problematic.

Risk Flag 5: Employer Objections Do Not Appear to be Consistent with the Circumstances of the Injury or Disease

The chief grounds for an employer objecting to a worker's claim for Time Loss benefits are: (1) the injury or disease did not occur, (2) the injury or disease was not work-related, (3) the injury or disease was not as serious as the worker claims, (4) the worker is not covered by the Act, (5) the injury is not covered by the Act or (6) there was no time loss involved. In most cases, it is not possible, based on the evidence in these files, to determine whether an objection is valid.

It would be a serious error to assume that an employer's objection is ipso facto evidence of bad faith or reflects an attempt to discourage an otherwise valid claim. To some degree, every workers compensation system depends on employers objecting to claims that are invalid. If they do not object, there is a risk of the compensation system being abused by persons claiming benefits to which they are not entitled. The coincidence of an employer objecting to a claim and a worker abandoning that claim does not, therefore, necessarily imply improper pressure on the employee to abandon or withdraw the claim. An employer's objection might only result in WorkSafeBC requesting additional information from the worker. Recognizing that the employer's objection was valid, the worker may choose not to respond to these requests for additional information, since this information (or the inability to produce the information) would only support the employer's objection. This is the benign interpretation of an employer's objection to a claim and the worker's subsequent abandonment or withdrawal of the claim.

The alternative view is that an employer's objection intimidates a worker, especially if the worker is unrepresented. The objection may be interpreted by the worker, rightly or wrongly, as suggesting the possibility of reprisals. This effect could be greater on workers who have difficulty communicating in English or difficulty navigating the health care system to provide the information required to proceed with their claim. If there is an aversion to bureaucracy, the effort required to surmount an employer's objection could also discourage a worker from proceeding with a claim. On this interpretation, employers' objections may not be benign. They can constitute a form of 'permitted dissuasion' from proceeding with a claim. It is possible that some

employers (or their third-party administrators) may make a practice of objecting to claims so as to discourage workers from filing claims or proceeding with them. This ‘permitted dissuasion’ may or may not be accompanied by other indications to the employee that he or she ought not to antagonize the employer by proceeding with the claim. It should also be noted that a worker may not be aware of an employer’s objection. In those cases, it would seem unlikely that the employer was seeking to intimidate the worker.

In the sample of 601 rejected, suspended and abandoned claims, employers objected to 179 (29.8%) of the claims. Table 61 shows that these objections also applied to 38 claims in which the Form 6 indicated that the worker sought medical attention. These 38 claims represent 6.3% of the total sample of 601 files.

Table 61: Employer Objections / Form 6 Indicates Worker Sought Medical Attention (n=601)

	Total
Worker sought Medical Attention from Hospital, Clinic or Physician:	158
Employer Objected to Claim	38
Percent of Claims Subject to Employer Objection (n=158)	24.1%
Percent of Claims Subject to Employer Objection (n=601)	6.3%

Table 62 shows that employers were significantly more likely to object to claims that involved mental stress or musculoskeletal injuries (back strain, bursitis, carpal tunnel syndrome, and tendinitis or tenosynovitis). Employers objected to 45.1% of mental stress claims and 50.0% of back strain claims. These are also conditions for which it can be more difficult to definitively establish a work-related cause.

Table 62: Employer Objections / Nature of Injury or Disease (n=601)

	No. of Files	Files Subject to Employer Objection	Percent of Files Subject to Employer Objection
Strains, not elsewhere classified	349	86	24.6%
Contusion	62	18	29.0%
Back Strain	62	31	50.0%
Mental Stress	51	23	45.1%
Other: including bursitis and related, carpal tunnel syndrome, chemical burns, fractures, hearing loss, heat burns and poisoning	16	4	*
Laceration	15	4	*
Infectious Disease	14	4	*
Tendinitis, Tenosynovitis	9	4	*
Abrasion	8	2	*
Concussion	8	2	*
Respiratory Inflammation	7	1	*
Total	601	179	29.8%

*Cell size too small to make objection percentage relevant.

A Form 8 (Physicians' First Report) recommending seven (7) or more days off work was included in 38 of the files. Of these 38 files, 14 were subject to an employer objection. It is possible, of course, that the employer had offered modified work arrangements of which the physician was unaware and that the worker subsequently accepted to those modified work arrangements. It is also possible that the employer had a legitimate concern that the injury was not work-related. However, it is somewhat surprising that more than a third of claims with Form 8s that recommended seven or more days off work were subject to an employer objection.

These 14 files represent 2.3% of the total sample of 601 files. Table 63 summarizes these data.

Table 63: Employer Objections / Form 8 Recommends Seven or More Days Off Work (n=601)

	Total
Claim Files with Form 8	111
Claim Files with Form 8 Recommending Seven or More Days Off Work	38
Of these: Files Subject to an Employer Objection - Deemed at Risk	14
Files Deemed at Risk as a Percent of Sample (m=601)	2.3%

It is difficult to draw strong conclusions about employer objections. However, claims that are supported by a Form 8 that recommends seven or more days off work and which are subject to an objection should be considered at risk of employer claim suppression. This is not to assert that an employer objection necessarily implies an attempt to dissuade a worker from proceeding with a valid claim. Nevertheless, the employer’s objection could require that the worker arrange further visits to his or her physician and could also require the physician to complete additional reports. The additional documentation requirements, especially if they seem unnecessary to the doctor or the worker, may discourage the worker from proceeding with the claim. Additionally, the objection in these circumstances, could reasonably be interpreted as implying a threat of a reprisal.

A less conservative application of Risk Flag No. 5 is the number of claims that were subject to an employer objection and where the Form 6 showed that the worker lost working time beyond the date of the incident and sought medical attention from a hospital, clinic or physician. There were 32 such files in the sample. On this less conservative application of the Risk Flag 5.3% of claims in the total sample could be considered at risk improper employer pressure to abandon or withdraw the claim. Table 64 summarizes these data.

Table 64: Employer Objections / Form 8 Recommends Seven or More Days Off Work (n=601)

	Total
Form 6 Indicated Worker Time loss Beyond the Date of the Incident AND Sought Medical Attention from a Hospital, Clinic or Physician	141
Of these: Files Subject to an Employer Objection - Deemed at Risk	32
Files Deemed at Risk as a Percent of Sample (m=601)	5.3%

Two applications of Risk Flag No. 5 are proposed. Both are suggestive of a risk of employer claim suppression behaviour. On the first test (physician recommended time off work of seven or more days), 2.3% of the sample of 601 files were deemed at risk of claim suppression. On the second test (worker reported time loss and sought medical attention), 5.3% of the rejected or abandoned time loss claims were deemed at risk of employer claim suppression.

Risk Flag 6: Evidence of a Lost Earnings Benefit Received from a Sick Leave or Similar Type of Benefit Plan

The WorkSafeBC Review Team found evidence in 20 of the files that the worker was receiving lost earning benefits from his or her employer or from an employer-sponsored plan. None of these were files in which there was a note indicating that the injury or worker was not covered, that the worker was represented or that the worker was pursuing a claim through ICBC or another channel. The implication appears to be that these workers opted for lost earnings benefits from their employer rather than pursue a WorkSafeBC claim. These 20 files represented 3.3% of the total sample of 601 files. In all of these cases, a Form 7 had been submitted. The workers' employers were aware, therefore, that the injury had occurred at the workplace and co-operated with the worker in not pursuing a WorkSafeBC claim. While the workers may or may not have experienced a financial loss, there can be little doubt that the claim was suppressed. Risk Flag No. 6, therefore, suggests that 3.3% of claims were likely abandoned or withdrawn because of employer pressure or improper employer agreement to use a sick leave plan in place of WorkSafeBC benefits.

Overall Assessment of Risk that Rejection of a Claim was Problematic or Associated with Claim Suppression

Table 65 summarizes the incidence of the Risk Flags and their interpretation.

Table 65: Summary of Risk Flags

Risk Flag	Description	Incidence	Incidence Rate n=601	Interpretation
Flag 1	Form 6 States Worker Missed Work beyond Day of Incident AND Sought Medical Attention Form 6 States Worker Missed Work beyond Day of Incident AND Sought Medical Attention AND There was a Witness to the Incident.	112 71	18.6% 11.8%	Flag #1 is the broadest indicator that a file should be regarded as 'problematic'. Flag 1 is triggered when the worker submitted a Form 6, reported missing time beyond the date of the incident <i>and</i> also sought medical attention from a hospital, clinic or physician. While not definitive, the worker's response to the incident is what would be expected in a valid Time Loss claim.
Flag 2	Form 6 States Worker Missed Work beyond Day of Incident AND Sought Medical Attention BUT There is No Form 7	50	8.3%	Flag #2 indicates that in addition to a file having the Flag #1 characteristics, there is also the additional consideration of a missing Form 7 (Employer Report). While there are legitimate explanations for a missing File 7 (e.g., the employer was unaware of the injury), the absence of a Form 7 is also consistent with an employer wanting to dissuade a worker from

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Risk Flag	Description	Incidence	Incidence Rate n=601	Interpretation
				proceeding with a claim. Flag #2 represents the highest estimate of a risk of claim suppression.
Flag 3	Form 7 and Form 6 Concur that Worker Missed Work beyond Day of Incident	93	15.5%	Flag #3 is a more conservative indicator than Flag #1 that a file should be considered 'problematic'. Files that trigger Flag #3 have the characteristics of Flag #1 and the file contains a Form 7 (Employer Report) which confirms the assertion in Form 6 (Workers Report) that the worker time loss.
Flag 4	Form 7 is Received Two Weeks or Later After Receipt of Form 6	18	3.0%	Receipt of a Form 7 two weeks or later after receipt of a Form 6 suggests that the employer may have applied inappropriate pressure on the worker not to proceed with the claim. It is also possible, of course, that the employer was late in learning of the incident or just administratively neglectful. Files identified by this Risk Flag are both 'problematic' and suggestive of a risk of improper pressure not to proceed.
Flag 5	Employer Objections Do Not Appear to be Consistent with the Circumstances of the Injury or Disease	14	2.3%	Flag #5 identifies files where an employer objection appears to be inconsistent with the circumstances of the injury and suggestive of a risk of suppression behaviour. The more conservative application of this test identifies files which were subject to an employer objection notwithstanding a physician's Form 8

Risk Flag	Description	Incidence	Incidence Rate n=601	Interpretation
	<p>Objection to Claims where a physicians' Form 8 recommends 7 or more days off work</p> <p>Objection to Claims where a Form 6 reports time loss beyond the date of the incident and the worker sought medical attention from a hospital, clinic or physician.</p>	32	5.3%	<p>recommending seven or more days off work. The less conservative application identifies files that were subject to an employer objection notwithstanding file evidence that the work lost working time and sought medical attention. Both variants of this Risk Flag therefore identify files in which there is a risk that the intent of the employer's objection was to discourage the worker from proceeding with the claim.</p>
Flag 6	Evidence of Lost Earnings Benefit Received or Pursued from a Sick Leave or Similar Plan.	20	3.3%	<p>Wage continuation through a sick leave or short-term disability plan is demonstrably proof of lost working time that probably should have been covered by WorkSafeBC lost earnings benefits. The worker may or may not have been financially disadvantaged. However, there is probably claim suppression when an employer knowingly allows benefits to be paid under a sick leave plan in</p>

Risk Flag	Description	Incidence	Incidence Rate n=601	Interpretation
				lieu of WorkSafeBC lost earnings benefits.

Assessment of WorkSafeBC Review Team

The WorkSafeBC Review Team were asked “based on your review of the description of the injury or disease in Form 6, Form 7 and the relevant medical reports, was this likely a Time Loss injury?” The Review Team concluded that 5 of the claims almost definitely pertained to a Time Loss injury and that 126 of the claims likely pertained to Time Loss injuries. These 131 files represented 21.8% of the total sample of 601 files. This separate assessment is consistent with the general findings of the analysis presented in this report.

Discussion of Results

The analysis undertaken in this Section proposed risk flags that identified two types of files. The first are ‘problematic’ files. The documentary evidence in these files indicates a likely injury or disease that entailed lost working time. It is therefore a puzzle why the workers did not proceed with these claims. While there may be valid reasons for the claims being abandoned, the files do not provide those reasons. Consequently, these files are characterized as problematic. Problematic files may or may not be associated with claim suppression behaviour by the workers’ employers. The analysis of the Risk Flags suggests that 11.8% to 18.6% of rejected or abandoned Time Loss claims could be considered problematic.

The second type of file that was identified are files in which the documentary record suggests a risk that claim suppression may have occurred. The proposed Risk Flags identified 2.3% to 8.3% of rejected, suspended or abandoned claims as falling into this category.

Section 4: Conclusions and Comparison of Results with Other Studies

The analysis in this report focused on estimating the incidence of four occurrences ¹¹

Under-claiming: workers who appear to be entitled to a WorkSafeBC benefit, but choose not to submit a claim, or having submitted a claim, choose not to proceed with the claim. Under-claiming may or may not be the result of improper pressure or inducement on the part of an employer.

Misrepresented Claims: claims that are submitted and subsequently classified as a medical benefits-only claim (i.e., a no time loss claim), notwithstanding that the injuries or diseases involved lost working time. Misrepresentation may or may not be the result of improper pressure or inducement on the part of an employer.

Claim Suppression: any overt or subtle actions by an employer or its agent which have the purpose of discouraging a worker from reporting a work-related injury or disease or claiming WorkSafeBC benefits to which he or she would likely be entitled. Included in this understanding of claim suppression are incentive or demerit plans which are perceived by workers as a deterrent to reporting work-related injuries or claiming benefits. Also included is the practice of offering a worker continued wages in lieu of the worker submitting (or proceeding with) a WorkSafeBC claim for lost earnings.

Problematic Claims Files: files that contain documentary evidence that is anomalous with the status of the file as either a no time loss claim or as a time loss claim that was rejected, suspended or abandoned. These files are associated with a risk of under-claiming, misrepresentation or claim suppression.

The report drew on four types of evidence:

1. A survey of 699 residents of B.C. who experienced one or more self-described work-related injuries or diseases in B.C. within the past three years (the “Worker Survey”);
2. A survey of 150 B.C. employers (the “Employer Survey”);

¹¹ Section 1 provides a more expansive discussion of these four terms.

3. An analysis of 1,043 accepted no time loss claims (i.e., medical benefits only) submitted between 2016 and 2019 (the “NTL Claims Analysis”); and
4. An analysis of 601 Time Loss claims submitted between 2016 and 2019 that were rejected, suspended or abandoned (the “RLT Claims Analysis”).

Throughout the report, it was stressed that it is not possible through either survey evidence or file evidence to form a definitive conclusion on the incidence of under-claiming, misrepresentation or claim suppression. All survey evidence is subject to sampling error. Moreover, while the sampling techniques used in our worker and employer surveys were designed to obtain samples broadly representative of the BC labour force and economy, we deliberately oversampled some categories of workers more likely to have experienced claim suppression and we oversampled employers in two industries where the claim file analysis suggested a greater risk of suppression. Survey evidence is also based on the respondents' perceptions and recollections, either of which may be faulty. As well, injuries or diseases that respondents believed were covered by WorkSafeBC may not be covered. File analysis can identify documentary evidence in a no time loss file which is anomalous with the claim being classified as no time loss. File analysis can also identify evidence in rejected, suspended or abandoned time loss claims which appears to be inconsistent with the claim not being accepted or proceeded with. This report characterized such files as 'problematic'. In some cases, the anomalies may be suggestive of claim suppression. However, we cannot say how many of these 'problematic' files reflect actual incidents of under-claiming, misrepresentation or claim suppression. We can only say that these files are associated with a risk of under-claiming, misrepresentation or claim suppression. In some cases, however, the anomalies may suggest that this risk is significant. Comparing the results of the risk estimates from the file analysis with the results of the surveys enables us to offer general conclusions on the plausible range of risk of under-claiming, misrepresentation and claim suppression. These conclusions can also be compared to the findings from other studies.

Under-Claiming

The Worker Survey indicates that 53.7% of workers who experienced a self-reported, work-related injury or disease and who also reported losing two or more days of work as a result, did not submit a claim for WorkSafeBC benefits. This estimate is higher

than the finding from an earlier survey which found a 40% underclaiming rate (Shannon and Lowe). However, the Shannon and Lowe survey included stronger filters to exclude claims that would likely not have been compensable. On the other hand, using a broader measure of under-claiming in which incidents involving only one day of lost working time are also included, suggests an under-claiming rate of 61.5% which is consistent with results of a more recent survey (Nadalin and Smith). We cannot say with certainty, therefore, whether the survey undertaken for this report over-estimates or accurately estimates the incidence of under-claiming WorkSafeBC benefits. In any event, there is no reason, based on the survey data to suggest that the actual under-claiming rate would be less than the 40% estimated by Shannon and Lowe and it may be higher.

There are two potentially important implications of the apparently high under-claiming rate. The first is that B.C.'s Medical Services Plan may be bearing costs for work-related injuries and diseases that ought to be borne by the employer-financed workers compensation system. The second is that analyses of trends in work-related injury and disease that rely on accepted claims data from WorkSafeBC may be seriously under-estimating the incidence of these types of injuries and diseases and also may be misinterpreting trends and the impact of prevention measures.

It is notable that the Worker Survey found no material differences in under-claiming related to age or gender. However, the Worker Survey did find that workers who do not have a post-secondary qualification are less likely to submit a WorkSafeBC claim as are workers who are not members of a union, workers who are employed on a temporary basis and workers whose employer has 10 or fewer employees. The Worker Survey also found that the most important reasons for under-claiming were lack of knowledge or misinformation about entitlement or how to apply for WorkSafeBC benefits, and not believing that it was worth the time to apply for benefits. These findings suggest how WorkSafeBC might frame a strategy to address under-claiming.

Claim Misrepresentation Risk

Between 4.1% and 12.1% of accepted no time loss claim files could be considered problematic in that there is documentary evidence in the claim file suggesting that the incident was associated with lost working time. The Employer Survey found that 26.7% of the employer respondents believe that misrepresentation of time loss

claims as no time loss claims occurs “all the time or almost all the time”. The implication of these findings is that claim misrepresentation is a substantial risk for WorkSafeBC.

Claim Suppression Risk in Rejected, Suspended or Abandoned Time Loss Claims

Of the 601 rejected, suspended or abandoned time loss claim files that were reviewed, between 71 and 112 of these could be considered problematic. This was 11.8% to 18.6% of the total sample. These files included:

- I. 112 files where the Form 6 (Workers Report) states that the worker missed work beyond the day of the incident and sought medical attention, but the file was subsequently rejected, suspended or abandoned (18.6%);
- II. 71 files with the above characteristics and the file also indicates that the incident was witnessed by another worker (11.8%); and
- III. 93 files where both the Form 6 and Form 7 (Employer's Report) concur that the worker lost working time beyond the day of the incident, but the file was subsequently rejected, suspended or abandoned (15.5%).

These estimates of the proportion of rejected, suspended or abandoned time loss claim files that is problematic is more conservative than the estimate of WorkSafeBC's review team which concluded that 21.8% of the files likely pertained to time loss injuries.

Claim suppression may have been a risk in some of these problematic files. Between 20 and 50 files had Risk Flags suggestive of a risk of claim suppression. These included:

- I. 14 files where there was an employer objection notwithstanding a physician's recommendation that the worker take seven or more days off work;
- II. 18 files where the Form 7 (Employer's Report) was submitted two weeks or more after the Form 6 (Worker's Report) was received by WorkSafeBC;
- III. 20 files where there was evidence of wage continuation, and
- IV. 32 files where there was an employer objection notwithstanding that the worker reported time loss and sought medical attention.

These files represent 2.3% to 5.3% of the total sample of 601 files. Claim suppression is therefore a relevant risk

Overt Claim Suppression

There are five procedures that can be used to interpret the survey data to generate an estimate of the potential incidence of claim suppression in the survey sample.

The first procedure identifies the 91 respondents who reported that their employer asked them not report time loss and/or threatened them with repercussions if they did so. These 91 respondents were 13.0% of the overall sample of 699 persons. This is the highest estimate of claim suppression behaviour, although it includes instances where the worker nevertheless submitted a claim for benefits.

The second procedure reduces the 91 respondents counted in the first procedure by including only those respondents who did not apply for WorkSafeBC benefits as a result of their employer's pressure. These 36 individuals, whose claim was likely suppressed, represent 5.2% of the overall sample of 699 persons.

The third procedure adjusts the first procedure by counting only the 31 respondents who reported that their employer asked them not report time loss and/or threatened them with repercussions if they did so and who did not receive assistance from their employer in submitting a WorkSafeBC claim. These 31 respondents represent 4.4% of the total sample of 699 persons.

The fourth procedure identifies the 26 respondents who reported losing two or more days of working time and who also reported that they did not apply for WorkSafeBC benefits because either they thought they would 'get into trouble' and/or their employer 'pressured' them not to apply. These 26 respondents represent 3.7% of the total sample of 699 persons.

Finally, a fifth procedure adds to the above 26 respondents a further 5 respondents who reported that they chose not to apply for benefits because of pressure from fellow employees who feared losing a bonus. It can be argued that such bonus schemes knowingly encourage employees to pressure other workers not to submit WorkSafeBC claims. These 31 respondents represent 4.4% of the total sample.

The following table summarizes these five procedures for interpreting the survey data.

Table 66: Alternative Procedures for Estimating the Incidence of Claim Suppression in the Survey Sample (n=699)

Survey Filters	No.	Percent of Total Sample (n=699)
#1 Respondents who reported that their employer asked them not report time loss and/or threatened them with repercussions if they did so.	91	13.0%
#2 Respondents who reported that their employer asked them not report time loss and/or threatened them with repercussions if they did so and who did not apply for WorkSafeBC benefits.	36	5.2%
#3 Respondents who reported that their employer asked them not report time loss and/or threatened them with repercussions if they did so and their employer did not provide assistance and who did not apply for WorkSafeBC benefits	31	4.4%
#4 Respondents who reported losing two or more days of lost working time as a result of a work-related injury and who did not apply for WorkSafeBC benefits because either they thought they would 'get into trouble' and/or their employer 'pressured' them not to apply.	26	3.7%
#5 Respondents who reported losing two or more days of lost working time as a result of a work-related injury and who did not apply for WorkSafeBC benefits because either they thought they would 'get into trouble' and/or their employer 'pressured' them not to apply. and/or they chose not to apply for benefits because of pressure from fellow employees who feared losing a bonus	31	4.4%

These findings on potential claim suppression are broadly consistent with the results of the Employer Survey in which 6% of the respondents indicated their belief that time loss injuries were “rarely or never” reported to WorkSafeBC while a further 11.3% indicated that they believed that this “sometimes” happens.

It should be noted that claim suppression behaviour on the part of an employer does not always deter a worker from submitting a claim. Moreover, in some cases, the claim suppression behaviour may not have been sanctioned by senior management. In the Worker Survey, approximately a third of the respondents who reported claim suppression behaviour also reported that their employer assisted them in filing the report to WorkSafeBC. This suggests that, in some instances, the claim suppression behaviour may have been attributable to a front-line supervisor who was acting in a manner that was contrary to the organization's human resources policy.

Bonus plans that reward a group of workers for being accident-free appear to incent those workers to discourage fellow employees from reporting incidents or submitting WorkSafeBC claims. The Worker Survey found that almost half of the employers that operated accident-free bonus schemes also engaged in overt claim suppression behaviour. WorkSafeBC may wish to consider guidelines or policies on the design and operation of accident-free bonus plans.

An important finding from the Worker Survey is that younger workers and workers employed by temporary agencies are more likely to report employer pressure not to report an incident to WorkSafeBC.

Comparison with Other Studies

There is a growing empirical literature analyzing reporting rates for work-related injuries. Four of these studies explored issues similar to those examined in this report.

- Manitoba Workers Compensation Board: a study was undertaken by Prism Economics in 2013 using a similar file analysis procedure and a similar worker survey design.
- Ontario Workplace Safety and Insurance Board: as study was undertaken by Prism Economics in 2013 using a similar file analysis procedure.
- Shannon & Lowe (2002) reported the results of a national survey which included a question on claiming workers compensation benefits.

- Nadlin & Smith (2020) reported the results of a survey undertaken in B.C., Alberta and Ontario which included a question on claiming workers compensation benefits.

Differences in the file analysis procedures, survey design and the structure of the samples make precise comparisons impossible. However, the studies concur on the importance and approximate magnitude of under-claiming, the risk of misrepresenting lost working time incidents as incidents that entailed no lost working time and the existence of claim suppression conduct on the part of employers. The table below compares the key findings of these studies.

Under-Claiming Rate for Lost Working Time Benefits	
WorkSafeBC study	53.7% (2 or more days of lost working time)
Manitoba study	40.2% (2 or more days of lost working time)
Shannon & Lowe	40.0% (all presumptively eligible claims)
Nadalin & Smith	64.5% (all presumptively eligible claims)
Risk that a Time Loss Injury was Reported as a No Time Loss Injury	
WorkSafeBC study	4.1% to 12.1%
Manitoba study	14.3% to 35.1%
Ontario study	5.0% to 10.0%
Estimated Incidence of Claim Suppression Conduct	
WorkSafeBC study	3.7% to 13.0% (depending on question)
Manitoba study	11.5%

Considerations for Future Research

Our findings suggest at least two areas where WorkSafeBC may wish to consider conducting or commissioning further research. The data from the Worker Survey show substantial under-reporting of work-related injury and illness to WorkSafeBC. Other studies have found similar results. This under-reporting implies that there are limitations to using workers compensation claims data as the basis for identifying the incidence of and trends in work injuries and illnesses. WorkSafeBC may wish to consider conducting regular worker surveys, both to measure trends in under-reporting and inform prevention strategies.

In addition, we found that 11.8% to 18.6% of rejected or abandoned time loss claims could be considered problematic in that the documentary evidence indicates a likely injury or disease that entailed lost working time. WorkSafeBC may wish to consider following up with a sample of workers who did not proceed with a claim, even though there was such evidence in their file, to better understand why the workers abandoned their claim.

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