

## Health Care and Community Social Services workers miss out on presumptive coverage despite workplace risks

### Background:

The Health Sciences Association applauds the government's decision to grant presumptive coverage to nurses and health care aides. Like First Responders and emergency dispatchers, when these workers receive a diagnosis of PTSD or another mental health diagnosis they will be able to access assistance without having to prove it was a workplace related injury.<sup>i</sup> This will reduce stress for workers, encourage them to get help when they need it and remove onerous bureaucratic steps.

However, there are a number of health care and community social service professionals currently not covered by the legislation who face ongoing workplace risks. In fact, workers in all sectors of work can experience work-related risk and trauma.

Statistics reveal that acts of violence or physical force are the second highest cause of workplace related injury for workers in BC's healthcare sector.<sup>ii</sup> Exposure to violence, or the potential of violence, has been clearly linked to PTSD and related mental health diagnoses.<sup>iii</sup>

Overall, health care occupations are rated among the top professions in Canada for lost time claims.<sup>iv</sup> Building robust supports for health care and community social service workers means that we acknowledge the very real toll workplace stress and traumatic events can take on a person's mental health.

Respiratory therapists, for example, deal with cardiac arrest and death on a day-to-day basis.<sup>v</sup> Social workers in health care often provide support to patients who have experienced trauma and abuse. Statistically, they experience high rates of burnout<sup>vi</sup> and PTSD associated with their work.<sup>vii</sup> Research points to elevated risks for suicidal ideation and depression for psychologists on health care teams.<sup>viii</sup>

A recent study documents that across health care professionals, including diagnostic professionals, physiotherapists, occupational therapists, and pharmacists, female health care workers were found to have higher suicide rates than women in other occupations. This points to the need for gendered workplace supports for health care teams.<sup>ix</sup>

Ultimately, current presumptive coverage regulations fail to account for the needs of all health care and community social service professionals who face substantial mental health risks in the workplace.

## “Mental Disorder” Claims for Related Occupations in Health: WorkSafe BC<sup>x</sup>

Jan 1 2016 – Oct 30, 2018	Mental Disorder Claims
Nurses	579
Social and Community Service Workers	434
Nurse Aides, Orderlies and Patient Service Assoc.	217
Paramedical Occupations	330
Home Support Workers, Housekeepers and Related	93
Social Workers	62
	<b>TOTAL: 1715</b>

\*Data excludes Bullying and Harassment Claims

BC now joins other provinces like Alberta, Ontario, New Brunswick, Manitoba and Saskatchewan in adopting presumptive coverage.<sup>xi</sup> Other provinces have extended presumptive coverage to include a diversity of health science professionals, not just nurses and health care aides. For example, since 2016, the Workers Compensation Board of Manitoba does not limit PTSD presumption to a specific occupation.<sup>xii</sup> This has helped to destigmatize PTSD and has resulted in more streamlined access to supports – essential given the links between recovery and early intervention.<sup>xiii, xiv</sup>

### How the Presumption is Applied in Each Jurisdiction<sup>xv</sup>

Application of the Presumption		Jurisdiction									
		BC	AB	AB	SK	MB	ON	NB	NS	PEI	YK
<b>Description</b>	Psychological Injury	√	√		√					√	
	PTSD			√		√	√	√	√		√
<b>Occupation</b>	All Workers		√		√	√				√	
	First Responders/ or First Responders and Limited Professions	√		√			√	√	√		√

**Our Ask:**

We are asking the BC Government to expand presumptive coverage for mental health disorder claims to include all health care and community social service workers in BC.

We appreciate that there is a cost to the government's budget to expand presumptive coverage, but there is also a cost when a worker does not get the support and resources they need after experiencing work-related trauma. The province is currently facing a severe shortage of health care and community social service professionals. We need to ensure that workers filling these critical roles are protected and supported, and that includes reducing the barriers to access assistance upon receiving a mental health disorder diagnosis.

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## Reference:

- <sup>i</sup> McKeen, Alex. "B.C. Extends Presumptive PTSD Coverage to Dispatchers, Nurses, Health Care Aids." *The Vancouver Star*, 2019. <https://www.thestar.com/vancouver/2019/04/16/bc-extends-presumptive-ptsd-coverage-to-dispatchers-nurses-health-care-aids.html>.
- <sup>ii</sup> WorkSafeBC. "Claim Count by Incident Type." WorkSafeBC, 2019. <https://www.worksafebc.com/en/health-safety/industries/health-care-social-services-statistics>.
- <sup>iii</sup> Browne, Angela. "Violence against Women by Male Partners: Prevalence, Outcomes, and Policy Implications." *American Psychologist* 48, no. 10 (1993): 1077–87.
- <sup>iv</sup> Association of Workers' Compensation Boards of Canada. "2017 Lost Time Claims in Canada." Statistics, 2019. [http://awcbc.org/?page\\_id=14](http://awcbc.org/?page_id=14).
- <sup>v</sup> Johnson, Saumy. "Code Blue Calls: Role of Respiratory Therapist." *Journal of Pulmonary and Respiratory Medicine* 4, no. 4 (2014): 135.
- <sup>vi</sup> Siebert, Darcy Clay. "Personal and Occupational Factors in Burnout among Practicing Social Workers: Implications for Researchers, Practitioners, and Managers." *Journal of Social Service Research* 32, no. 2 (2006): 25–44.
- <sup>vii</sup> MacDonald, Heather A., Victor Colotla, Stephen Flamer, and Harry Karlinsky. "Posttraumatic Stress Disorder (PTSD) in the Workplace: A Descriptive Study of Workers Experiencing PTSD Resulting from Work Injury." *Journal of Occupational Rehabilitation* 13, no. 2 (2003): 63–77.
- <sup>viii</sup> Kleespies, Phillip M., Kimberly A. Van Orden, Bruce Bongar, Diane Bridgeman, Lynn F. Bufka, Daniel I. Galper, Marc Hillbrand, and Robert I. Yufit. "Psychologist Suicide: Incidence, Impact, and Suggestions for Prevention, Intervention, and Postvention." *Professional Psychology: Research and Practice* 42, no. 3 (2011): 244–251.
- <sup>ix</sup> Milner, Allison, Humaira Maheen, Marie Bismark, and Matthew Spittal. "Suicide by Health Professionals: A Retrospective Mortality Study in Australia, 2001-2012." *Medical Journal of Australia* 205, no. 6 (2016): 260–65.
- <sup>x</sup> WorkSafeBC. "Mental Illness Claims Data." Richmond, BC: WorkSafeBC, 2019.
- <sup>xi</sup> Keefe, Anya, Stephen Bornstein, and Barb Neis. "An Environmental Scan of Presumptive Coverage for Work-Related Psychological Injury (Including Post-Traumatic Stress Disorder) in Canada and Selected International Jurisdictions." St. John's, NF: Centre for Occupational Health and Safety Research, 2018.
- <sup>xii</sup> Workers Compensation Board of Manitoba. "PTSD Presumption." Presumption Details, 2019. <https://www.wcb.mb.ca/ptsd-presumption-0>.
- <sup>xiii</sup> Keefe, Anya, Stephen Bornstein, and Barb Neis. "An Environmental Scan of Presumptive Coverage for Work-Related Psychological Injury (Including Post-Traumatic Stress Disorder) in Canada and Selected International Jurisdictions." St. John's, NF: Centre for Occupational Health and Safety Research, 2018.
- <sup>xiv</sup> Kearns, Megan C., Kerry J. Ressler, Doug Zatzick, and Barbara Olasov Rothbaum. "Early Interventions for PTSD: A Review." *Depression and Anxiety* 29, no. 10 (2012): 833–42.
- <sup>xv</sup> Keefe, Anya, Stephen Bornstein, and Barb Neis. "An Environmental Scan of Presumptive Coverage for Work-Related Psychological Injury (Including Post-Traumatic Stress Disorder) in Canada and Selected International Jurisdictions." St. John's, NF: Centre for Occupational Health and Safety Research, 2018.