



WSIB Claims Management Update

December 4 2014

Flash NEWSLETTER

Post-Secondary Co-op Students – WSIB Coverage Update

There have been changes made with respect to WSIB coverage for post-secondary co-op students. This is relevant for school boards who may have unpaid student teachers placed with them or other post-secondary students on unpaid placements.

The Ministry of Training, Colleges and Universities (MTCU) published a booklet in June 2014 entitled: “Guidelines for Workplace Insurance for Postsecondary Students of Publicly Assisted Institutions on Unpaid Work Placements.” In the guidelines there is a list in Appendix A of approved training agencies funded by grants from MTCU and it includes the names of most Ontario universities and community colleges. As long as the post-secondary student comes from one of the colleges or universities listed in Appendix A then the college or university is considered to be the training agency and the school board, the placement employer. MTCU directly pays the WSIB for the costs of benefits paid to an eligible student trainee from an approved training agency which has a work-related injury or occupational disease while on placement. It is the responsibility of the placement employer to check with the training agency that there is coverage for a student trainee while on an approved work experience program. Post-secondary students arranging their own volunteer placement at a school board would not necessarily have WSIB coverage paid for by MTCU

MTCU does not cover the cost of coverage for post-secondary students from training agencies not listed in Appendix A. For example, a student teacher that goes to university in British Columbia and is on placement with an Ontario school board would not be covered by this arrangement. The training agency in British Columbia would need to make other arrangements to cover that post-secondary student. School boards should be cautious about accepting post-secondary students from other jurisdictions. If you do decide to accept post-secondary students from other jurisdictions then you should take active steps to ensure that they have WSIB coverage from another province or valid disability insurance to reduce the risk of a claim against the school board’s own WSIB firm number or claim against OSBIE insurance.

If a post-secondary co-op student has a minor first aid injury then this needs to be reported to the training agency for future use in case the condition gets worse. It does not need to be reported to the WSIB.

If a post-secondary co-op student sustains a work-related injury or occupational disease that needs to be reported to the WSIB then the placement employer needs to complete a Form 7 and send it to the training agency. An injury needs to be reported to the WSIB when the co-op student requires health care, or loses time from work or requires modified work for 7 days or more. There is also a need for the placement

employer to send the training agency a completed “Postsecondary Student Unpaid Workplace Insurance Claim form” and a “Letter of Authorization form” to represent the placement employer. These forms are available to be downloaded from the MTCU website. It is important that all of these forms are completed and sent to the training agency.

The placement employer is responsible for completing the Form 7 and sending it to the training agency within 3 business days of learning of a reportable accident. The training agency needs to send the completed Form 7 to the WSIB within 7 business days of learning of the reportable accident. Completion of the Form 7 and submission of the form to the WSIB is a joint responsibility of the training agency and the placement employer. There can be fines for late reporting. On the Form 7 you can list the employer as the Ministry of Training, Colleges and Universities. Each university and college listed in Appendix A has a unique firm number to be used for WSIB coverage of post-secondary co-op students participating in approved work experience programs. Do not use your own firm number on the Form 7 for a post-secondary co-op student.

The new process eliminates the need for workplace agreements to be signed by everyone in advance of a post-secondary co-op student placement but increases the paper work requirements when someone does have an injury that needs to be reported to the WSIB.

This article is intended to provide general advice only and if you have specific questions or concerns please speak to your SBCI Claims Manager for advice on your individual situation. Thank you.



Ministry of Training, Colleges and Universities

Strategic Policy and Programs Division

GUIDELINES FOR WORKPLACE INSURANCE FOR POSTSECONDARY STUDENTS ON UNPAID WORK PLACEMENTS

Guidelines for Workplace Insurance for Postsecondary Students of Publicly Assisted Institutions on Unpaid Work Placements

GUIDELINES FOR WORKPLACE INSURANCE FOR POSTSECONDARY STUDENTS ON UNPAID WORK PLACEMENTS
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GUIDELINES FOR WORKPLACE INSURANCE FOR POSTSECONDARY STUDENTS ON UNPAID WORK PLACEMENTS

The following guidelines and mandatory requirements apply to workplace insurance claims relating to all injuries/diseases incurred by Student Trainees in publicly assisted postsecondary institutions (the Training Agency) on Unpaid Work Placements with a Placement Employer.

1. Definitions

ACE-INA: ACE-INA Insurers, a private insurance company retained by the Government of Ontario.

Approved Program: a postsecondary program offered by a Training Agency that is funded through MTCU's operating grant.

Benefits: workplace safety and insurance benefits that are provided under the *Workplace Safety and Insurance Act (WSIA)*, including health care, early and safe return to work, labour market re-entry, loss of earnings benefits, loss of retirement income benefits, non-economic loss benefits and survivor benefits, and, where the case so requires, the analogous benefits provided under the predecessor legislation, the *Workers' Compensation Act*.

Eligible claim: a claim to the WSIB for Benefits made by a Student Trainee or by the survivors of a Student Trainee for an injury/disease arising out of or in the course of the Student Trainee's participation in an Unpaid Work Placement with a Placement Employer.

MTCU: the Ministry of Training, Colleges and Universities.

Placement Employer: the employer with whom the Student Trainee is placed by a Training Agency to receive training as part of the requirements of his or her Approved Program.

Training Agency: a postsecondary educational institution identified in Appendix A.

Student Trainee: a student engaged in an Unpaid Work Placement with a Placement Employer.

Unpaid Work Placement: an unpaid work placement that is required as part of an Approved Program offered by a Training Agency.

WSIA: *Workplace Safety and Insurance Act, 1997*.

WSIB: Workplace Safety and Insurance Board.

2. Relevant Statutory and Regulatory Framework

The WSIA governs the provision of Benefits with respect to injuries/diseases incurred in the workplace. The WSIA is administered by the WSIB. The *WSIB Operational Policy Manual* sets out the WSIB's policies relating to its decisions about workplace insurance coverage for unpaid trainees, placement employers' rights and obligations, premiums, benefits, and other related workplace safety and insurance issues.

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The full content of the *WSIB Operational Policy Manual* is available on line at www.wsib.on.ca.

Relevant WSIB documents with respect to unpaid training placements include:

Subject	Chapter-section-subject
Individuals on Unpaid Training Placements	12 - 04 - 04
Who is an Employer?	12 - 01 - 01
Coverage for Unpaid Trainees	12 - 04 - 05

As specified in the WSIA, an employer that is in a compulsory covered industry or has applied for coverage must ensure that insurance coverage as required under the WSIA is in place.

Training Agencies must comply with a number of statutory and regulatory requirements in administering the Postsecondary Student Unpaid Work Placement Program. In particular, it is incumbent on all Ontario publicly assisted postsecondary institutions to comply with the *Freedom of Information and Protection of Privacy Act* (FIPPA) and the *Ontario Human Rights Code* (OHRC) under which we all operate.

Training Agencies are subject to FIPPA and OHRC; therefore, have the independent obligation to ensure that they protect privacy and ensure fairness in accordance with FIPPA and OHRC.

3. MTCU Coverage (WSIA and ACE-INA)

The Government of Ontario, through MTCU, pays WSIB for the cost of Benefits it pays to Student Trainees enrolled in an Approved Program at a Training Agency during Unpaid Work Placements with employers who are either compulsorily covered or have voluntarily applied to have WSIB coverage.

MTCU also covers the cost of private insurance with ACE-INA for Student Trainees enrolled in an Approved Program at a Training Agency during Unpaid Work Placements with employers which are not required to have compulsory coverage under the WSIA

The Government of Ontario provides such coverage to encourage the participation of employers in providing unpaid work placements for Student Trainees required as part of Ontario's publicly assisted postsecondary education and training programs.

The *WSIB Operating Policy Manual* states it is the Placement Employer's responsibility to contact the Training Agency to determine whether the WSIB insurance costs are funded by the government. **The Training Agencies are required to ensure that the Placement Employer with which they are placing Student Trainees is aware of whether there is WSIB coverage for such students and is aware of relevant WSIB reporting procedures in the event of an injury/disease.**

GUIDELINES FOR WORKPLACE INSURANCE FOR POSTSECONDARY STUDENTS ON UNPAID WORK PLACEMENTS**4. Eligibility for MTCU Coverage (WSIA and ACE-INA)**

MTCU directly pays the WSIB for the cost of Benefits paid to an eligible Student Trainee when:

- WSIB allows the Training Agency to deem itself the Student Trainee's employer; and,
- the Training Agency is listed in Appendix A.

The above-noted Student Trainees, including international students, are eligible to receive MTCU-covered Benefits or ACE-INA coverage if the Unpaid Work Placement is arranged or authorized by the Training Agency as a requirement of the Student Trainee's Approved Program to gain required work skills and experience.

Note: Consistent with *WSIB Operating Policy Manual*, Student Trainees are still considered to be eligible for Benefits if they receive one or more of the following types of payment:

- Social assistance benefits (e.g., through Ontario Works Program);
- Training allowances;
- Honoraria;
- Reimbursement of expenses; and,
- Stipends or any money paid to the Student Trainee by the Training Agency.

5. Ineligibility for MTCU Coverage (WSIA and ACE-INA)

The following Student Trainees are not eligible to receive MTCU-covered Benefits or ACE-INA coverage:

- Students in postsecondary education programs that are not funded through MTCU operating grants;
- Students in postsecondary training programs not funded through MTCU operating grants;
- Student Trainees in unpaid work placements which are not a required part of their program and which they have arranged or organized themselves. For the purpose of MTCU covered-Benefits or ACE-INA coverage, such placements are considered volunteer work. This includes Student Trainees in medical programs who participate in volunteer programs not required by their medical program;
- Student Trainees who are paid a salary;
 - A Student Trainee on a placement who receives payment or wages from the Placement Employer is considered to be a worker and must be provided with WSIB insurance coverage paid for by the Placement Employer as is any other worker employed by the Placement Employer.
- Student Trainees whose work placement is with the same Training Agency that trains them;

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- This includes Student Trainees who, as part of their program, do unpaid research for their Training Agency.
- Student Trainees who are in the classroom portion of their training program;
 - MTCU covered-Benefits and ACE-INA coverage extends only to the work placement portion of the training program. There is no MTCU-covered WISA or ACE-INA coverage for the in-class portion of training programs.
- Student Trainees on placements arranged by Training Agencies that are not identified in Appendix A;
 - This includes Students Trainees undertaking an unpaid placement in Ontario but whose Training Agency is outside the province.
- Student Trainees of a Training Agency who, as part of a formal course or program, attend a training placement with an Ontario Placement Employer but the placement occurs outside of Ontario.

6. Student Safety (WSIA and ACE-INA)

It is the responsibility of the Training Agency to ensure Student Trainees receive training in safe working practices as part of the Approved Program. The Training Agencies must use due diligence to ensure that Student Trainees are not placed in unsafe working environments. This includes, when arranging Unpaid Work Placements for Student Trainees, that an evaluation of the safety practices of the potential Placement Employer be conducted. ✕

7. Pre-placement Responsibilities

Prior to Student Trainees commencing an Unpaid Work Placement, the Training Agency is responsible for:

- Informing Student Trainees that if they are injured or contracted a disease while on an Unpaid Work Placement while enrolled in an Approved Program, the Training Agency will disclose personal information relating to the Unpaid Work Placement and any WSIB claim or ACE-INA claim to MTCU;
- Informing Student Trainees that they are eligible to make a claim for Benefits in the event of an injury/disease incurred while in an eligible Unpaid Work Placement;
- Ensuring that the Placement Employer understands the coverage available to Student Trainees on Unpaid Work Placements;
- Confirming whether the Placement Employer has WSIB coverage during the period of the Unpaid Work Placement; and,
- Ensuring that the Placement Employer, if it has WSIB coverage, is aware of WSIB reporting procedures in the event of an injury/disease.

GUIDELINES FOR WORKPLACE INSURANCE FOR POSTSECONDARY STUDENTS ON UNPAID WORK PLACEMENTS**8. Postsecondary Student Unpaid Work Placement Workplace Insurance Claim Form**

If a Student Trainee incurred an injury/disease while on an Unpaid Work Placement, the Training Agency, the Student Trainee and the Placement Employer must complete (and sign) the MTCU *Postsecondary Student Unpaid Work Placement Workplace Claim Form* in order to make a WSIB claim, including:

- Confirmation of the Training Agency;
- Confirmation of the Placement Employer; and
- The Student Trainee's signature indicating consent to the indirect collection of personal information by MTCU;
 - The signature of a parent or guardian is required to indicate consent **if the Student Trainee is under 18 years of age.**

When confirming Unpaid Work Placements with the Placement Employer the Training Agency must provide the following information prior to the Student Trainee's placement:

- Student Trainee full name;
- Local address and telephone number of the Student Trainee;
- Specific days when the Student Trainee will be at the Placement Employer's worksite; and,
- Student Trainee acceptance of the conditions of the Unpaid Work Placement.

When the Training Agency is placing multiple Student Trainees with the same Placement Employer, the Training Agency may provide a list of Student Trainees to the Placement Employer along with the following:

- Local address and telephone number of each Student Trainee;
- Specific days when each Student Trainee will be at the Placement Employer's worksite; and,
- Confirmation that Each Student Trainee has been made aware of the conditions of the Unpaid Work Placement.

Note: The *Postsecondary Student Unpaid Work Placement Workplace Insurance Claim Form* can be accessed from the **Postsecondary Education website**.

9. Reporting Procedures and Claims for WSIB

Placement Employers are required to report any injury/disease in compliance with the *WSIB Operating Policy Manual*, 15-01-02, "Employer's Initial Accident Reporting Obligations."

- Any injury/disease, however minor, that a Student Trainee suffers in relation to an Unpaid Work Placement, should be reported by the Student Trainee to the Placement

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Employer (immediate supervisor) and to the appropriate contact person in the Training Agency.

- Information must include when, where, and how the work-related injury/disease occurred.
- Injuries/diseases requiring only first-aid do not have to be reported to the WSIB but a record of the details should be kept by the Training Agency in the event that a report is required in the future.

10. Reporting a Work-Related Injury/Disease to WSIB:

- **Within three days of learning of a work-related injury/disease the Placement Employer must complete WSIB Form 7 *Employer's Report of injury/disease* (which can be access from www.wsib.on.ca and send it to the Training Agency.**
- **The form must be then submitted by the Training Agency to WSIB within seven business days of learning of a work-related injury/disease.**
- Reporting is required when a Student Trainee experiences an injury/disease while on an Unpaid Work Placement that:
 1. Requires health care by a health care professional for which there is a fee for service (this could include a physician, dentist, chiropractor, hospital, etc.);
 2. Results in lost time from work beyond the date of the work-related injury/disease;
 3. Requires modified work for more than seven calendar days; and/or
 4. Results in exposure to communicable disease.

Detailed instructions and guidelines for completing Form 7 *Employer's Report of injury/disease* are included with the form on the WSIB website at www.wsib.on.ca

All Training Agencies have been assigned a unique firm number to be used in all correspondence with the WSIB.

Attention to detail at the time of reporting helps eliminate later difficulties and unnecessary delays resulting from the WSIB's need to request routine information.

11. Completion of the Placement Employer's Report of Injury/Disease and *Letter of Authorization to Represent the Placement Employer* for WSIB

Completion of Form 7 *Employer's Report of injury/disease* is the joint responsibility of the Placement Employer and the Training Agency.

- Under the WSIA, the Placement Employer is considered to be the "employer" for unpaid trainees.

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- As such, the Placement Employer must authorize the Training Agency to act as the representative with WSIB for the claim being submitted. A *Letter (template) of Authorization to Represent the Placement Employer* is provided in Appendix C.
- The *Letter of Authorization to Represent the Placement Employer* must accompany Form 7 *Employer's Report of injury/disease*.

12. Distribution of WSIB Form 7 *Employer's Report of Injury/Disease*:

Completed signed copies of Form 7 *Employer's Report of injury/disease*, the *Letter of Authorization to Represent the Placement Employer* and the *Postsecondary Student Unpaid Work Placement Workplace Insurance Claim Form* must be distributed to the following parties:

- WSIB;
- The Student Trainee; and,
- MTCU (See Section 17, Ministry Contacts).

13. WSIB Penalties for late filing

- The completed Form 7 *Employer's Report of injury/disease* along with *Letter of Authorization to Represent the Placement Employer* and the *Postsecondary Student Unpaid Work Placement Workplace Insurance Claim Form* must be completed by the Placement Employer and submitted to the Training Agency within three days of learning of the work-related injury/disease
- The Form 7 *Employer's Report of injury/disease* must be submitted by the Training Agency to WSIB within seven business days of learning of the work-related injury/disease.
- WSIB may impose a \$250 penalty for each separate incident of late submission, incomplete information, not reporting on a pre-approved version of this form, and/or failing to provide a copy of the completed Form 7 *Employer's Report of injury/disease* to the Student Trainee.
- Failing to comply with reporting requirements is a provincial offence.
- Training Agencies should not delay submitting Form 7 *Employer's Report of injury/disease* while waiting for more detailed information.
 - For example, if statements from witnesses are not finalized or available by the deadline date for submission, incomplete reports may be filed to comply with the seven-day requirement. Additional pertinent information can be forwarded in a letter as soon as possible after the work-related injury/disease.
- The completed Form 7 can be submitted to WSIB electronically (e-form) or by facsimile/courier to ensure the seven-day time limit is met.

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- If sent by facsimile a hard copy of the Form 7 must be sent by mail to WSIB as follow-up.
- If there is a delay that can be justified the Training Agency must explain the circumstances in a letter to WSIB who may choose to waive the late fee.

14. Action Following the Filing of a Claim to WSIB

Following submission of the claim, WSIB will determine whether the injury/disease is work-related and whether benefits should be paid to the affected Student Trainee.

- Once a claim is approved, the affected Student Trainee will continue to receive Benefits until they have recovered to the point where he or she can return to the Approved Program.
- The Student Trainee may still be in receipt of benefits after he or she returns to the Approved Program, if there is any ongoing impairment.
- Any benefit entitlement paid by WSIB to Student Trainees as a result of claims submitted utilizing the firm numbers assigned to Training Agencies will be charged to MTCU.
 - MTCU will pay such invoices centrally.
- All communications regarding the claim will be forwarded to the identified contact in the Training Agency as per usual WSIB processes if the Placement Employer's *Letter of Authorization to Represent the Placement Employer* is attached to the Form 7 *Employer's Report of injury/disease*.
- The Training Agency assumes the role of the Placement Employer for the Student Trainee's claim.
 - Once entitlements have been granted, it is important that a designated individual within the Training Agency contact WSIB on a regular basis.
 - After a claim is allowed, WSIB periodically requires information to confirm continuing entitlement to benefits. Copies of these forms are available at www.wsib.on.ca and details on their use are available from WSIB.
- Either the Student Trainee or the Training Agency as the authorized agent of the Placement Employer, can appeal any decision made by WSIB.
 - Information on the appeal process is available from WSIB at www.wsib.on.ca.
- Information on the completion of other WSIB forms and processes can be found in the WSIB's Operational Policy Manual available from WSIB as a subscription or online at www.wsib.on.ca.

GUIDELINES FOR WORKPLACE INSURANCE FOR POSTSECONDARY STUDENTS ON UNPAID WORK PLACEMENTS**15. Managing Claims to WSIB**

The Training Agency is required to maintain contact with all parties involved throughout the duration of a claim, including WSIB, the affected Student Trainee and his/her treating health care professional, and the Placement Employer.

The goal is to minimize the impact of the work-related injury/disease on the Student Trainee for safe return to the Approved Program.

Some modification of the Approved Program and/or precautions taken in the workplace may be necessary to accommodate the Student Trainee if there are ongoing limitations/restrictions.

16. Ace-INA Claims

Not all Placement Employers in businesses/workplaces are required to have WSIB coverage. Placement Employers may not have WSIB coverage if the business is classified as being non-compulsory covered under the WSIA

In the event a work-related injury/disease with a Placement Employer is not covered by WSIB, Student Trainees are provided with insurance coverage through ACE-INA. This includes benefits for accidental death or injury, and medical/dental benefits to treat an accidental injury.

17. Reporting Procedures and Data Collection for ACE-INA Claims

Any work-related accident, however minor, to a student in a work placement must be reported by the Student Trainee to the Placement Employer and to the appropriate contact person in the Training Agency.

Detailed instructions regarding the ACE-INA claims process can be obtain from ACE-INA by contacting ACE-INA at: 1-800-387-7199 and quoting policy number SGC 10 28 45.

18. ACE-INA Data Collection

For the purpose of determining insurance premiums, each year Training Agencies are required to file with MTCU the total hours of Unpaid Work Placement by Approved Program with Placement Employers not covered under the WSIA and the total number of Student Trainees involved. It is necessary to indicate the applicable industry where the Unpaid Work Placement occurs.

MTCU requires this information by semester and contacts the Training Agencies shortly after the end of each semester (January, May and September).

- Note: data relating to international postsecondary students are to be reported separately from domestic postsecondary student data.

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Contact: Lillian Priess

College Finance Unit
Postsecondary Finance and Information Management Branch
Ministry of Training, Colleges and Universities
7th Floor Mowat Block
900 Bay Street
Toronto, ON
M7A 1L2
Fax: 416-325-1959
Tel: (416) 325-9733
E-mail: lilian.priess@ontario.ca

Contact: Wendy Parsan

University Finance Unit
Postsecondary Finance and Information Management Branch
Ministry of Training, Colleges and Universities
7th Floor Mowat Block
900 Bay Street
Toronto, ON
M7A 1L2
Fax: 416-325-1959
Tel: (416) 325-2847
E-mail: wendy.parsan@ontario.ca

GUIDELINES FOR WORKPLACE INSURANCE FOR POSTSECONDARY STUDENTS ON UNPAID WORK PLACEMENTS**Appendix A: Training Agencies for the Purposes of these Guidelines**

Algoma University
Brock University
Carleton University
College of the Dominican or Friar Preachers of Ottawa
University of Guelph
Le Collège de Hearst
Lakehead University
Laurentian University
McMaster University
Northern Ontario Medical School
Nipissing University
Ontario College of Art & Design University
University of Ontario Institute of Technology
University of Ottawa
Queen's University
Ryerson University
University of Toronto
Trent University
University of Waterloo
University of Western Ontario
Wilfrid Laurier University
University of Windsor
York University

Algonquin College of Applied Arts and Technology
Cambrian College of Applied Arts and Technology
Canadore College of Applied Arts and Technology
Centennial College of Applied Arts and Technology
Collège Boréal d'arts appliqués et de technologie.
Collège d'arts appliqués et de technologie La Cité collégiale.
Conestoga College Institute of Technology and Advanced Learning
Confederation College of Applied Arts and Technology
Durham College of Applied Arts and Technology
Fanshawe College of Applied Arts and Technology
George Brown College of Applied Arts and Technology
Georgian College of Applied Arts and Technology
Humber College Institute of Technology and Advanced Learning
Lambton College of Applied Arts and Technology
Loyalist College of Applied Arts and Technology
Mohawk College of Applied Arts and Technology
Niagara College of Applied Arts and Technology
Northern College of Applied Arts and Technology
St. Clair College of Applied Arts and Technology

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St. Lawrence College of Applied Arts and Technology
Sault College of Applied Arts and Technology
Seneca College of Applied Arts and Technology
Sheridan College Institute of Technology and Advanced Learning
Sir Sandford Fleming College of Applied Arts and Technology

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APPENDIX B: LIST OF REQUIREMENTS AND SOURCES

Name of Form	Source/ Contact
<u>Postsecondary Student Unpaid Work Placement Workplace Insurance Claim Form</u>	See section 19 of Guidelines - Ministry Contacts
Form 7 – Employer’s Report of Injury/Disease	Workplace Safety and Insurance Board www.wsib.on.ca
Letter of Authorization to Represent the Placement Employer	See section 19 of Guidelines - Ministry Contacts
Form 9 - Employer’s Subsequent Statement	Workplace Safety and Insurance Board www.wsib.on.ca
ACE INA Insurance Statistics/information	See section 19 of Guidelines - Ministry Contacts Canada.ahclaims@acegroup.com Toll Free Number is: 1-877-772-7797 Fax Number is: (416) 368-0641
ACE INA Insurance Claims Forms	Ministry of Training, Colleges and Universities Lillian Priess (Colleges) (416) 325-9733 Wendy Parsan (Universities) (416) 325-2847

GUIDELINES FOR WORKPLACE INSURANCE FOR POSTSECONDARY STUDENTS ON UNPAID WORK PLACEMENTS**Appendix C: Letter of Authorization to Represent Employer**

Ministry of Training,
Colleges and Universities
Strategic Policy and Programs Division

Ministère de la Formation et des
Collèges et Universités
Division des politiques stratégiques
et des programmes

Mowat Block
900 Bay Street
Toronto, ON M7A 1L2

Édifice Mowat
900, rue Bay
Toronto, ON M7A 1L2

**Letter of Authorization to Represent Employer****This section to be completed by Training Agency**

Please be advised that the following Training Agency will serve as the Employer's representative in matters pertaining to WSIB in this work related injury/disease.

Training Agency _____

Address _____

City, Province _____

Postal Code _____ Firm # _____

Contact Person _____ Telephone # _____

This section to be completed by Placement Employer

_____, unpaid training participant is claiming that he/she
(Training Participant's Name)

suffered a work related injury disease _____ while on work placement with our company.
(Date)

Company name _____

Address _____

City, Province _____

Postal Code _____ Firm # _____

Contact Person _____ Telephone # _____

Placement Employer's Authorization Signature

Date

To be attached to Form 7 and sent to WSIB.

You will receive workplace insurance compensation if you are:

- A student enrolled in an Approved Postsecondary Program;
- Injured or contracted a disease while on an Unpaid Work Placement; and
- Eligible for workplace insurance compensation as determined by,
 - the WSIB, if your Placement Employer is covered under the WSIA (WSIB 416-344-1000); or
 - ACE-INA, if your Placement Employer is not covered under the WSIA (ACE-INA 1-800-387-7199).

Claims under the WSIA are made by submitting the following required documents to WSIB, with copies to MTCU:

- a WSIB Form 7;
- the letter of authorization; and
- *Postsecondary Student Unpaid Work Placement Workplace Insurance Claim Form* completed by the student, the Placement Employer and the Institution.

If your Placement Employer is not covered under the WSIA, your eligibility for and payment of workplace insurance compensation will be determined by ACE-INA.

Claims under ACE-INA are made by submitting an ACE-INA designated form, completed in accordance with the ACE-INA instructions, with a copy to MTCU.

In this form:

- "ACE-INA" means the ACE-INA Insurers, a private insurer retained by the Government of Ontario.
- "Approved Postsecondary Program" means a postsecondary program offered by an Ontario college of applied arts and technology or an Ontario publicly assisted university, and funded through operating grants provided by the Ministry of Training, Colleges and Universities.
- "Institution" means the Ontario college of applied arts and technology or Ontario publicly assisted university at which the student is enrolled.
- "MTCU" means the Ontario Ministry of Training, Colleges and Universities or any successor ministry.
- "Placement Employer" means the employer providing the Unpaid Work Placement.
- "Unpaid Work Placement" means an unpaid work placement that is required as part of an Approved Postsecondary Program.
- "WSIA" means the *Workplace Safety and Insurance Act, 1997*.
- "WSIB" means the Workplace Safety and Insurance Board.

Note to Institution: As identified in the MTCU *Guidelines for Workplace Insurance for Postsecondary Students on Unpaid Work Placements*, it is your responsibility to inform students before they commence an Unpaid Work Placement that if they are injured or contracted a disease while on an Unpaid Work Placement, the Institution will disclose their personal information to MTCU, if relevant to a workplace insurance compensation claim.

A. Parties Consenting to the Unpaid Work Placement

1. Name of student

Last name	First name	Middle name
Student no.	Email address	Telephone no.

2. Name of Placement Employer

Name of Training Supervisor Last name	First name	Middle name
Email address		Telephone no.

2a. Placement Employer is covered under the WSIA, WSIB #: _____

2b. Placement Employer is covered under the ACE-INA

3. Firm #

Name of institution

Name of contact person Last name	First name	Middle name
Email address		Telephone no.

B. The Approved Postsecondary Program

1. Name of the Approved Postsecondary Program in which the student is enrolled

C. Student Unpaid Work Placement Schedule

1. What are the start and completion dates of the student's Unpaid Work Placement?

Start date (yyyy/mm/dd): _____ Completion date (yyyy/mm/dd): _____ Total days: _____

2. What are the normal hours of the student's Unpaid Work Placement?

From (hh:mm): _____ To (hh:mm): _____ Shift work: Yes No

3. What are the normal days of the week of the student's Unpaid Work Placement?

Specify days: _____ To: _____

D. Confirmation of Institution

I, _____
Last name, first name

am authorized to complete this confirmation on behalf of the institution.

Position title

I hereby confirm that:

- 1. I have read the definitions of Approved Postsecondary Program and Unpaid Work Placement above.
- 2. The above-named student was enrolled in an Approved Postsecondary Program offered by the Institution and was injured or contracted a disease during an Unpaid Work Placement relating to that program.
- 3. The Institution has provided the student with notice that it will be disclosing personal information relating to the Unpaid Work Placement and any WSIB or ACE-INA claim to MTCU.
- 4. I have been informed by the Placement Employer that:
 - a. the Placement Employer has WSIB coverage for the entire period of the placement as indicated in Section C.
 - b. the Placement Employer is not covered by WSIB for the entire period of the placement as indicated in Section C.

Signature of institution representative

Date (yyyy/mm/dd)

X

Confirmation of Placement Employer

Note: this confirmation may be completed by the student's Unpaid Work Placement training supervisor or other person authorized to complete the confirmation on behalf of the Placement Employer.

I, _____
Last name, first name

am authorized to complete this confirmation on behalf of the Placement

Position held

Employer. I hereby confirm:

- 1. The Unpaid Work Placement Schedule for the above-noted student as identified in Part C above.
- 2. The student was injured or contracted a disease while on an Unpaid Work Placement with the Placement Employer.
- 3. The Placement Employer:
 - a. has WSIB coverage for the entire period of the placement as indicated in Section C.
 - b. is not covered by WSIB for the entire period of the placement as indicated in Section C.

Signature of Placement Employer Representative

Date (yyyy/mm/dd)

X

Notice of Collection and Consent of Student

MTCU collects your personal information, directly from you and indirectly from your postsecondary institution, your placement employer and either the Workplace Safety and Insurance Board (the Board) or ACE-INA Insurers (the Insurer) to administer and finance the payment of your workplace insurance compensation. Administration includes verifying your eligibility, making payments to the Board or the Insurer and evaluating, monitoring and auditing MTCU's coverage of workplace insurance compensation.

I hereby confirm the accuracy of the personal information about me on this form and consent to the indirect collection of personal information by MTCU.

Signature of student

Date (yyyy/mm/dd)

X

Signature of parent/guardian if under 18

X