

POLICY NUMBER: POL-91

Chapter:
CLAIMS

Subject:
REPETITIVE STRAIN INJURIES

Effective Date:
June 27, 2002

Last Updated On:
July 23, 2020

PURPOSE STATEMENT:

The purpose of this policy is to explain how the Workers Compensation Board determines whether an injury or condition is considered to be a compensable repetitive strain injury.

REFERENCE:

Workers Compensation Act R.S.P.E.I. 1988, Cap. W-7.1, Section 18
Workers Compensation Board Policy, POL-71, Conditions for Entitlement
Workers Compensation Board policy, POL-90, Time Frame Limitations for Claims Filing and Invoicing
Workers Compensation Board Policy, POL-160, Decision Making

DEFINITION:

In this policy:

“Repetitive strain injury” means a variety of medical conditions affecting muscles, tendons or ligaments caused by repetition, force, or maintenance of sustained or dynamic awkward postures.

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POLICY:

1. A repetitive strain injury is the result of the cumulative effect of activities and conditions. Injuries of this type are not attributable to a single incident.
2. A repetitive strain injury affects muscles, tendons or ligaments and may include, but is not limited to, tendinitis, bursitis, carpal tunnel syndrome, and tennis elbow.
3. For a claim to be accepted as a repetitive strain injury, all of the following criteria must be met:
 - there must be sufficient evidence of significant risk factors for the development of a repetitive strain injury related to work activities;
 - the medical information must support that there is a repetitive strain injury; and
 - the repetitive strain injury must be work-related, i.e., the activities that caused the injury must have happened at a time and place that is consistent with work, and while in the course of an activity whose purpose is related to work.
4. The Workers Compensation Board will adjudicate claims for repetitive strain injuries using the principles set out in this policy and Workers Compensation Board policy, POL-71, Conditions for Entitlement.

Risk Factors

5. Determining whether a repetitive strain injury is work-related requires an analysis of risk factors. There must be sufficient evidence of significant work risk factors related to work activities to be considered a work-related repetitive strain injury. All relevant information, including significant risk factors outside of work, will be considered.
6. The major risk factors for repetitive strain injury in the workplace are:
 - Repetition - the number of times the specific activity(s) is repeated and the percentage of the workday during which it occurs.
 - Force - the weight or impact of the object being handled and/or the force of body action required to carry out the activity.
 - Posture - the sustained or dynamic posture or body positioning required to do the activity in the work area.

7. Repetition and force are the primary risk factors involved in repetitive strain injuries, with awkward posture increasing the effect of the two primary factors. If work involves high force and high repetition, this indicates a high probability of a relationship between the repetitive strain injury and work. This probability is increased with awkward posture. Low force and low repetition indicate a low probability of a relationship to work.

8. The investigation into a repetitive strain injury will include an Occupational Therapist assessment and, wherever feasible, a worksite visit. The Occupational Therapist will, if possible, assess the worker performing the workplace activities to evaluate the extent of exposure to repetition, force and awkward posture. The following factors may also be considered:
 - vibration;
 - frequency;
 - duration of task or employment;
 - recovery time/ biological resting;
 - individual work style;
 - unaccustomed activity;
 - extreme cold temperatures.

9. Current medical research is used to evaluate the impact of each risk factor which varies depending on the diagnosis. The extent to which the activity or risk factor is a significant component of the employment will be considered.

Carpal Tunnel Syndrome

10. Where the repetitive strain injury is carpal tunnel syndrome and is bilateral (involving both wrists), the Workers Compensation Board will consider whether both wrists became symptomatic at the same time and the degree to which each hand/wrist is utilized in carrying out the employment activities. Research indicates that since both hands may not perform identical activities and are therefore subject to different risk factors, a work-related carpal tunnel syndrome may be more likely to be unilateral. The diagnosis of bilateral carpal tunnel syndrome is more probably due to non-occupational risk factors such as a systemic illness.

Work-Relatedness

11. The presence of the following circumstances, although not conclusive, may support a relationship to work:
- precise symptom onset during work activity;
 - new to the activities in the job;
 - recent increase in activities at work;
 - improved symptoms away from work.
12. The presence of the following circumstances, although not conclusive, may support that the diagnosis is not related to work:
- symptom onset away from employment;
 - activities performed for many years;
 - recent increase in activities outside work;
 - other medical considerations (conditions, medications or therapies);
 - bilateral symptoms without bilateral activity;
 - continued or increasing symptoms away from work.
13. A claim for repetitive strain injury will be accepted if:
- Having weighed all of the available evidence, and on the balance of probabilities, the work-related risk factors are more likely to have caused the repetitive strain injury than non-work-related risk factors, as set out in Workers Compensation Board policy, POL-160, Decision Making; and
 - The claim meets the criteria set out in Workers Compensation Board policy, POL-71, Conditions for Entitlement.

Date of Accident

14. The date of accident for repetitive strain injuries is outlined in Workers Compensation Board policy, POL-90, Time Frame Limitations for Claims Filing and Invoicing.
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HISTORY:

July 23, 2020 – Non-substantive changes to reflect new policy, Decision Making (POL-160).

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December 13, 2018 - Amended to set out the criteria for acceptance of repetitive strain injuries, provide clarification on how the WCB determines if a repetitive strain injury is work-related, and expand the application of the policy beyond upper extremities to other parts of body.

September 12, 2016 - Non-substantive changes to reference Workers Compensation Board policy, POL-90, "Time Frame Limitations for Claims Filing and Invoicing."

March 29, 2012 - Amended to include the content of POL-79, "Carpal Tunnel Syndrome", which was rescinded.

July 31, 2008 - Amended to add #6, which clarifies what the WCB considers to be the date of accident for repetitive strain injuries.

March 30, 2006 - Amended to reflect an updated review of the medical literature on repetitive strain injuries.

June 27, 2002 - Replaces Policy and Practice "Repetitive Motion Injuries" dated November 14, 1994.

Board of Directors Approval Date: June 27, 2002