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Reporting Injuries, Hazardous Occurrences, and the Determination Process One-Page Member & Supervisor Guide

RCMP Members and supervisors must understand that injury reporting, hazardous occurrence investigations, and the Determination Process are separate processes. One does not replace the other. Failure to complete all required steps can impact a Member's access to care and future entitlements.

1. Reporting a Work-Related Illness or Injury

If a Member experiences a physical or psychological illness or injury in the course of their duties, they must notify their supervisor as soon as practicable.

Supervisor responsibilities:

- Complete Employer's Report of Workplace Illness/Injury (Form 6583)
- Submit Form 6583 to Divisional Occupational Health Services

Completing Form 6583 acknowledges the report. Supervisors do not determine work-relatedness.

Member responsibilities:

- Submit Determination Claim Package to Divisional Occupational Health Services, including as applicable:
 - Member's Report of Work-Related Illness/Injury (Form 6584)
 - Attending Physician's Statement (Form 4056)
 - Dental Injury/Illness forms (Form 6582)

2. The Determination Process

The Determination Process for Access to Occupational Health Care Benefits determines whether an illness or injury is work-related. It is based on workers' compensation best practices and requires documentation from the Member, supervisor, and health-care provider.

If work-related, the Member may access RCMP Occupational Health Care benefits. This RCMP Validation may later support Veterans Affairs Canada determinations if required. Supplemental Health Care benefits are not restricted by this process.

3. Hazardous Occurrence Reporting – Form 3414

FORM 3414 (previously LAB 1070) is used to investigate the hazardous occurrence, not the injury.

- Required for all hazardous occurrences, whether or not injury occurred
- Completed by a supervisor or manager
- Submitted to Occupational Safety, not Health Services
- Does not initiate the Determination Process

4. Why Both Processes Matter

If injury reporting and the Determination Process are not completed, the injury may not be recognized as work-related, access to Occupational Health Care may be limited, and future VAC claims may lack RCMP validation.

5. Where to Get Help

Forms, guidance, and Determination Claim Packages are available through Divisional Occupational Health Services.

Claim Package Instructions

Reporting a Work-Related Illness/Injury for Members Physical or Psychological claims

The complete work-related physical or psychological illness or injury determination claim package includes:

Work Related Physical or Psychological Determination Claim Package Forms:	To be completed by:	To be submitted to:
1. Employer Report of Workplace Illness/Injury (Form 6583)	Member's supervisor	Divisional Occupational Health Services office (submitted by supervisor)
2. Member's Report of Work-Related Illness/Injury (Form 6584)	Member	Divisional Occupational Health Services office
3. Attending Physician's Statement (Form 4056)*	Member (Section A) s Treating physician/Medical Practitioner (Sections B, C, D)	Divisional Occupational Health Services office

Dental claims

The complete work-related dental injury or illness determination claim package includes:

Work Related Dental Injury or Illness Determination Claim Package Forms:	To be completed by:	To be submitted to:
4. Employer Report of Workplace Illness/Injury (Form 6583)	Member's supervisor	Divisional Occupational Health Services office (submitted by supervisor)
5. Member's Report of Work-Related Illness/Injury (Form 6584)	Member	Divisional Occupational health Services office
6. Attending Physician's Statement (Form 4056)*	Member (Section A) s Treating physician/Medical Practitioner (Sections B, C, D)	Divisional Occupational health Services office

*The APS (4056) is to be completed by a medical practitioner if the dental impairments are secondary to a physical or psychological illness/injury.

Submitting the Claim Package:

Once all the required forms pertaining to the work-related injury or illness type have been completed, submit the documentation along with any additional supporting medical or dental information you may have to your divisional Occupational Health Services (OHS) office.

CLAIM PACKAGE INSTRUCTIONS

Reporting a Work-Related illness/Injury for Members

The Determination Process

Physical and psychological claims

1. The Health Service Nurse (HSN) will review and assess the Claim Package for physical or psychological illness/injury as per the RCMP Determination Process for Access to Occupational Health care Benefits.
2. The HSN may contact you by phone to seek additional information.
3. If the HSN is unable to make a positive determination, the claim is referred to the National Determination Unit, Occupational Health & Safety Branch (OHSB) for a second level review.
4. In the event a second level review is required, the Director General of OHSB will render a decision based on the recommendation of one or more of the following health professionals: National Advisor for Medical case Management, Determination Process nurse, National Medical Advisor, Chief Psychologist and/or the external dental consultant.
5. If your illness/injury is determined to be work related, you may be eligible for Occupational Health care benefits in accordance with the provisions of **AM - ch. XIV.1. Health Core Entitlements and Benefits Programs.**
6. If your illness/injury is determined to be unrelated to work, you have the option to initiate the RCMP Grievance Process within 30 days of receiving the determination decision.

Dental claims

1. Your divisional Occupational Health Services office will review the claim package to confirm all required forms are completed and forward your dental determination claim package to the National Determination Unit for processing.
2. The Determination Unit will collaborate with the Health Benefits Program and the MSC Dental Consultant to review the dental claim and Canadian Dental Association (COA) treatment plan.
3. The Director General of OHSB will render a decision based on the recommendation of one or more of the following health professionals: National Advisor for Medical case Management, Determination Process nurse, National Medical Advisor, Chief Psychologist and/or external dental consultant.
4. If your dental illness/injury is deemed work related, you may be eligible for Occupational Health care benefits in accordance with the provisions of **AM-ch. XIV.1. Health Care Entitlements and Benefits Programs.**
5. The dental treatment approval process is administered by the Health Benefits Program.
6. If your dental illness/injury is determined to be unrelated to work, you have the option to initiate the RCMP Grievance Process within 30 days of receiving the determination decision.