



Injury & Illness Classification Guideline

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Summary of Changes

This Summary shows:

- The location of each change within the document
- All changes to this document since it was last approved and published

Location of Change	Summary of Change
Entire Document	This document replaces and expands upon CO-085B Classification of Occupational Injuries and Illnesses Standard
	Revision 2.1 Minor Change – Update header issue that was cause during conversion to .pdf at approval stage.
Purpose	Revision 2.2 Minor change – Added guidance that WCB classification/reporting is unrelated to Suncor classification.
3.2.3	Revision 2.2 Change – Occupational to non-occupational
4.1.3	Revision 2.2 Minor change – added guidance to classification of burns where exposure was repeated or beyond one shift
4.2.10	Revision 2.2 Minor change – added guidance to classification of ionizing radiation where exposure was repeated or beyond one shift
4.4.1	Revision 2.2 Minor change – added (could be up to one shift) for additional clarification
5.3.1	Revision 2.2 Change – Removed table of Burn classifications based on size and degree. Added paragraph to provide guidance to classify burns based on treatment.
5.3.5.3	Revision 2.2 Change – Removed “The use of prescription medication beyond one time use during visit to health professional (see 5.3.5.2 above). Example(s): A worker sustains an injury, is prescribed medication, advised by the health professional to take it as needed, and the worker uses the prescription medication.
5.3.6.1	Revision 2.2 Minor change – updated wording to include health professionals (from physician and nurse practitioner) to include procedures such as massage therapy, physiotherapy, etc.
Terms & Definitions	Revision 2.2 Minor change – Updated the definition of Occupational Illness to provide guidance that an illness classification should be used for any exposure beyond one shift.
Terms & Definitions	Revision 2.2 Minor Change – Added a definition for “shift”.



R# Changes in the new revision will be identified with a revision triangle beside it.



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1 About this Guideline

Purpose The purpose of this guideline is to provide a framework for consistent classification of all occupational injuries and illnesses, enterprise-wide.

Note: Classification of injuries and illnesses is separate and unrelated to any Worker's Compensation Board (WCB) or similar governing body within any of Suncor Energy Inc. operating regions.

Scope The scope of this guideline is limited to the classification of injuries and illnesses

Classification of incidents resulting in environmental impact, asset damage and/or impact on company reputation is considered out of scope.

Target Audience This Guideline applies to Suncor Energy Inc. and subsidiaries over which Suncor has operational control (collectively "Suncor" or "the Company" or "enterprise-wide").

Suncor EH&S personnel and other workers that may be involved in classification of injuries and illnesses.

Guideline For Section 2.1.12 (classification of incidents) and 2.1.16 (corporate adjudication process) of the Incident Management Standard SUN-00010.

Reporting Protocol This guideline is consistent with the following:

- Canadian Association of Petroleum Producers (CAPP)
- International Association of Oil and Gas Producers (OGP) Recordkeeping Guidelines for Occupational Injuries and Illnesses
- Occupational Safety and Health Administration (OSHA)

Deviations from one or more of the above guidelines include:

- Suncor does not consider restricted work cases to be lost time cases, - this differs from OSHA
- Within Suncor, illness cases are not combined with injuries for statistical reporting, - this differs from OSHA
- Within Suncor, some contractor injuries are included in statistical reporting, - this differs from OSHA

2 Guidelines

2.1 Work Relationship and Reportability

Use the following guidelines to better understand the decision points and terms used in the process flow (sections 2.2 and 2.3) and other criteria examples.

Establish Work Relationships The section provides recommendations for establishing work relationships for the determination of an injury or illness classification.

- 2.1.1 Work relationships should be established when the injury or illness results from an event or exposure in the work environment.
- 2.1.2 The work environment should consist of the employer premises and other locations where workers are engaged in occupational activities or are present as a condition of their employment.
- 2.1.3 The employer's premises should consist of the total establishment and should include the primary work facility and other areas that the employer considers part of the general work area.

Contractors In addition to employees, Suncor reports relevant injuries and illnesses and exposure hours for contractors working under Suncor's Management System (MS).

This section provides guidance for establishing whether Suncor should report a contractor injury or illness.

In order to determine whether a contractor is under the Suncor MS, you should first determine in which mode the contractor is operating. There are three possible modes (OGP, CAPP). These are listed in the table below.

Contractors operating within modes 1 and 2 are governed by Suncor's MS and therefore exposure hours and reportable injuries, illnesses and fatalities are reportable by Suncor. Contractors in mode 3 operate under their own MS and their data is not reportable by Suncor.

Note: Contractors can move between different modes depending on where they are conducting their work. For example, a common carrier that is working on a Suncor site may be a mode 2 contractor, but once they leave site and are driving on public roads between sites, they may be a mode 3 contractor.

Mode	Description	Examples
<p>Mode 1 Contractor works within Suncor MS.</p>	<p>The contractor provides people, processes and tools for the execution of the contract under Suncor supervision, instructions and the Suncor MS. The contractor has a MS to provide assurance that personnel for whom it is responsible are qualified and fit for the work and that the processes, tools, materials, and equipment they provide are properly maintained and suitable for the contract.</p>	<ul style="list-style-type: none"> - Independent contractors (formerly called PSAs), such as construction coordinators, EH&S Advisors, On-site Physicians - Operating Facility Capital Project Coordinator (Refineries, terminals, retail) - Operating Facility Inspectors - Turnaround contractors - Carwash service providers - Marketing companies while on site setting up shelving and merchandise in retail locations
<p>Mode 2 Contractor executes contract under its own MS. Suncor has Health & Safety (H&S) decision authority.</p>	<p>The contractor executes all aspects of the contract under its own MS, providing the necessary instructions and supervision and verifying the proper functioning of its MS. Suncor is responsible for verifying the overall effectiveness of the H&S management controls put in place by the contractor, including the MS's interface with subcontractors and the compatibility of the contractor's H&S MS with Suncor's.</p>	<ul style="list-style-type: none"> - General Contractors who perform engineering and construction work for projects - Maintenance and Operations Support Contractors - Common Carriers (trucks) while loading/unloading product on Suncor work environment - Turnaround contractors
<p>Mode 3 Contractor is independent.</p>	<p>The contractor's MS has no interface with Suncor's MS and the contractor is not required to report H&S performance data, including injuries or illnesses, to Suncor. However, this does not exclude the possibility that Suncor may wish to guide and influence H&S performance to fit the type of contract being executed.</p>	<ul style="list-style-type: none"> - Prime Contractors - 3rd party vendors transporting modules and equipment - Organizations with access agreements (municipalities, pipeline companies) - Common Carriers while in transit (not in a Suncor work environment) - Marine and Rail logistics - Material suppliers - Delivery or repair companies

Note: The examples for modes of contractors listed in the table above are for guidance only and are not meant to be all inclusive.

Occupational (Occ.)

An injury or illness is classified as occupational (Occ.) if the event or exposure in the work environment was the discernible cause of the injury or illness or it significantly aggravated a pre-existing injury or illness, regardless of where signs or symptoms surface. Injuries or illnesses are considered Occ. include:

- 2.1.4 When a worker is on a Suncor premise, a work relationship is presumed since the company is responsible for control of the work environment.
- 2.1.5 When a worker is off a Suncor premise, a work relationship, such as travelling for Suncor business, should be established.
- 2.1.6 If a period of time elapses between the date of the injury and the date of report of that injury, the injury should be classified as an occupational incident if the investigation process can establish that a work-related event was the discernible cause of the injury or illness.

For examples for determining “occupational” status, see section 3.

Non-Occupational (Non-Occ.)

An injury or illness is presumed to be non-occupational (Non-Occ.) if they result solely from incidents not related to the workplace or work, such as:

- 2.1.7 Injuries incurred during normal life activities such as eating, sleeping and recreation.
- 2.1.8 Illnesses which surface while within the work environment but were contracted elsewhere.
- 2.1.9 Injuries incurred during normal commuting to or from the work environment.

For examples for determining “non-occupational” status, see section 3.

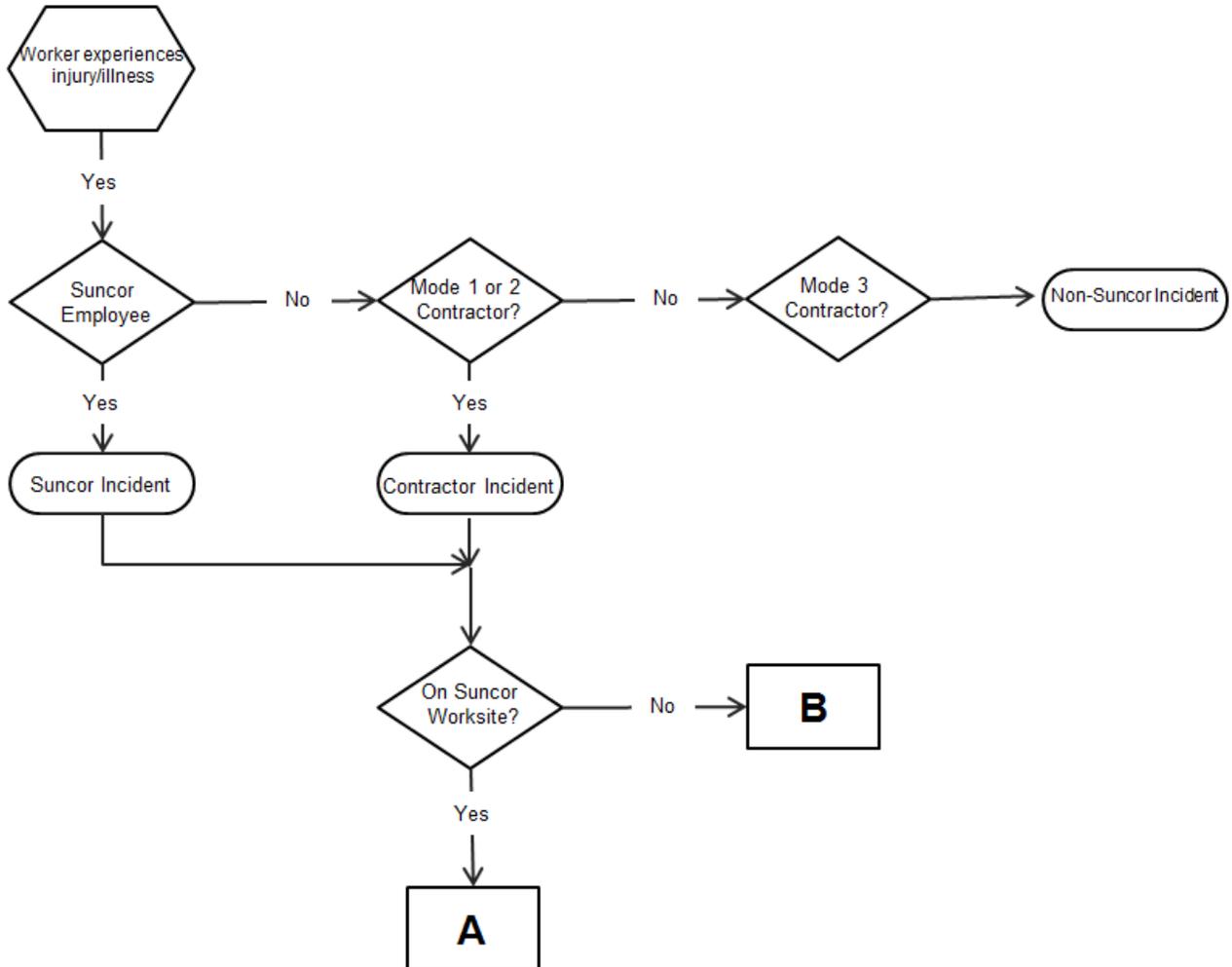
Note: Medical verification is not required to determine whether an injury or illness is occupational; however, if there are inconsistencies in an injury or illness report that lead to questions regarding the validity of the claim and there is no substantive or medical evidence to support the claim, the injury or illness can be considered non-occupational and non-reportable.

Injury or Illness Ownership

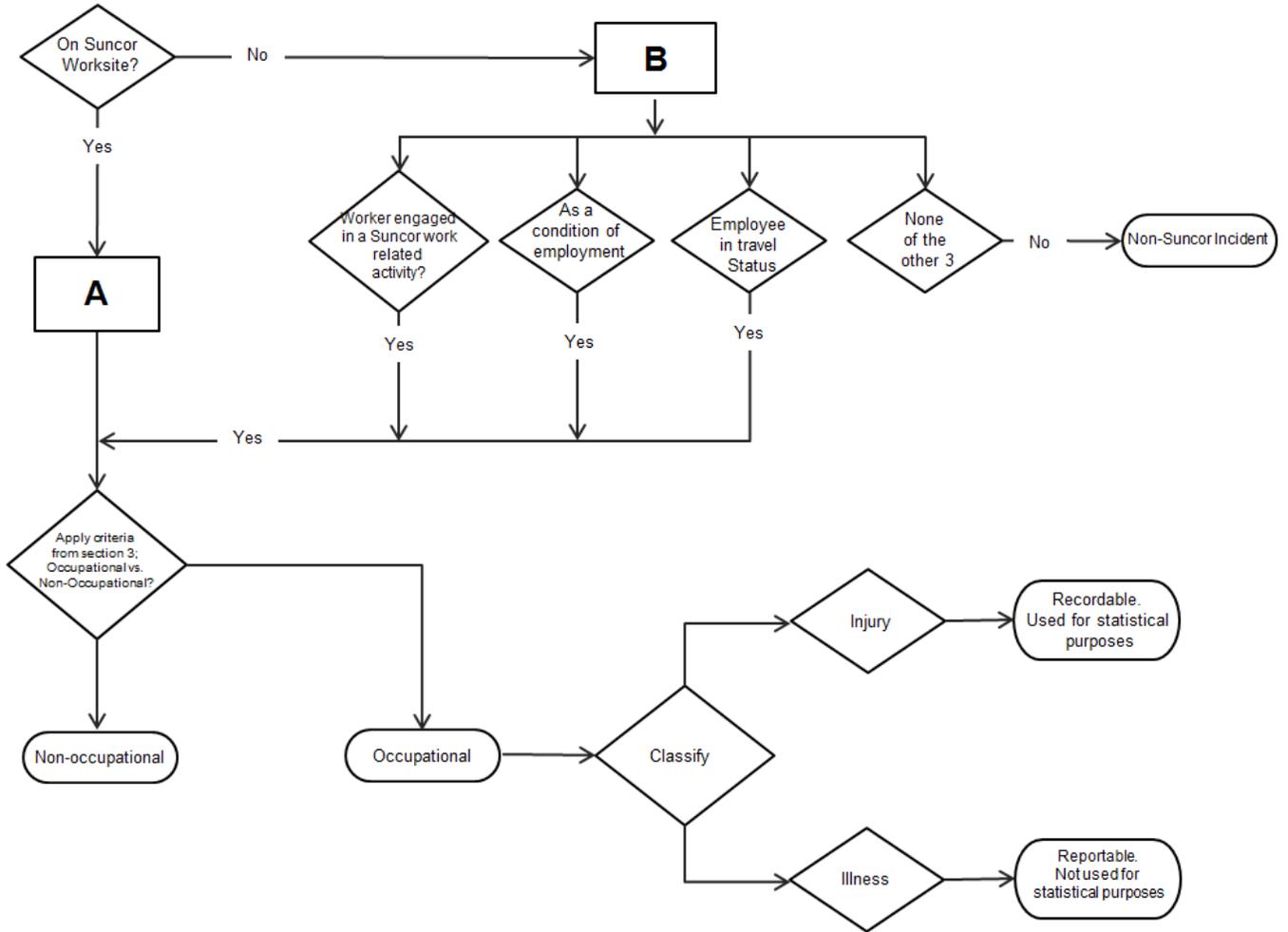
Ownership of an injury or illness should be established based on the work environment:

- 2.1.10 If an injury or illness is caused by a defect in the work environment, the injury/illness should be owned by the function (FN) or business unit (BU) responsible for maintaining the work environment where the injury or illness took place.
- 2.1.11 If an injury or illness is not caused by a defect in the work environment, the injury or illness should be owned by the injured person’s FN or BU.

2.2 Determining Reportability Flow Chart



2.3 Determining Work Relationship Flow Chart



3 Criteria For Distinguishing Between Occupational and Non-Occupational Incidents

Use the following descriptions and examples, organized alphabetically, to help you determine whether an injury or illness is classified as Occupational or Non-Occupational.

3.1 Breaks (Meals and Normal Life Activities)

	Examples	Occ.	Non-Occ.
3.1.1	The injury or illness occurs as a result of a deficiency in the work environment, while a worker is taking a washroom, smoke, coffee, lunch or normal life activity break.	✓	
3.1.2	A worker is made ill by ingesting food contaminated by workplace contaminants.	✓	
3.1.3	A worker is made ill from food poisoning through food supplied by the employer.	✓	
3.1.4	A worker suffers an allergic reaction from food provided by the employer, where the allergy is known to the worker and where the food was not clearly labeled for common food allergens and/or ingredients (such as contains nuts, seafood).	✓	
3.1.5	A worker suffers an allergic reaction from food provided by the employer, where the allergy is not previously known to the worker.		✓
3.1.6	An injury or illness that is solely the result of a worker eating, drinking, or preparing food or drinks that the worker brought in.		✓
3.1.7	A worker suffers an injury or illness as a result of eating food that was purchased from a vending machine where Suncor has no “care and control” over the process used in the food preparation, storage or handling.		✓

3.2 Employer Premises

	Examples	Occ.	Non-Occ.
3.2.1	Injuries and illnesses incurred while participating in social events or recreational activities, regardless of the worker’s pay status if the worker’s participation in the activities was work-related or was an expectation of employment.	✓	
3.2.2	An injury or illness that results while voluntarily participating in work, or recreational activities, organized by Suncor in the work environment where a deficiency in the work environment is identified as the cause of	✓	

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	Examples	Occ.	Non-Occ.
	the incident.		
3.2.3	An injury or illness that results while voluntarily participating in work or recreational activities organized by Suncor outside of the work environment (such as United Way hockey tournament, volunteering at food bank, charity gift shopping, blood donation, physical examination, exercise class, racquetball, or baseball).		✓
3.2.4	An injury or illness sustained when a worker voluntarily attends a course, not as a condition of employment, regardless of whether on company time.		✓
3.2.5	An injury or illness sustained when a worker is required, as a condition of employment, to be at work outside normal working hours due to a meeting, work assignment, conference, or training.	✓	
3.2.6	Injuries sustained on a public sidewalk while a worker is engaged in a work-related activity, such as walking to a business meeting.	✓	
3.2.7	At the time of the injury or illness, a worker is present in the work environment as a member of the general public. Example(s): A worker takes their family on a tour of the Oil Sands while they are on vacation and someone gets hurt. Worker is injured at a Petro-Canada gas station purchasing gas while on their own time.		✓
3.2.8	An injury or illness incurred at work from an "act of God" (for example, being struck by lightning), where a working relationship has been established.	✓	
3.2.9	Incidents occurring during the course of employment that are due to another person's willful act, regardless of whether on the employer's premise. Example(s): A worker is assaulted when getting out of taxicab on the way to hotel while on a business trip.	✓	
3.2.10	Injuries sustained by a worker resulting from horseplay or robbery in the work environment.	✓	
3.2.11	Injuries sustained by a worker during a fight with a co-worker within the work environment.	✓	
3.2.12	Injuries or illnesses incurred as a result of a worker being under the influence of alcohol or drugs at work.	✓	
3.2.13	The injury or illness is solely the result of personal grooming, self-medication for a non-occupational condition, or is intentionally self-inflicted.		✓
3.2.14	An injury or illness that is the result of an employee doing personal tasks (unrelated to their employment) at the work site outside of the employee's assigned working hours.		✓

3.3 Foreign Bodies

	Examples	Occ.	Non-Occ.
3.3.1	<p>A worker has an embedded foreign body removed from their eye, and work relationship can be established.</p> <p>Example(s): A welder has a metal fragment removed from his eye and reports that yesterday he was welding all day. He further confirms that he did not complete any activities during his non-work hours where he could have obtained this foreign body.</p>	✓	
3.3.2	<p>A foreign body enters a worker's eye when they are removing work clothing or PPE, and a work relationship can be established.</p>	✓	
3.3.3	<p>A worker has an embedded foreign body removed from their eye, and they report that they were engaged in activities during their non-work hours where they could have obtained it.</p> <p>Example(s): A welder has a metal fragment removed from his eye and reports that yesterday he was welding all day. He also confirms that during his non-work hours, he was welding in his garage at home.</p>		✓

3.4 Mental Stress/Psychological Distress

	Examples	Occ.	Non-Occ.
3.4.1	<p>A worker is directly involved with, affected by, or witness to a traumatic work-related incident and suffers mental illness.</p>	Please see note below	

Note: Mental illness is not considered to be occupational unless the employee voluntarily provides the employer with an opinion of a physician or other licensed health care professional with appropriate training and experience (such as a psychiatrist, psychologist, psychiatric nurse practitioner, etc.), stating that the employee has a mental illness that is work-related.

3.5 Parking Lots

	Examples	Occ.	Non-Occ.
3.5.1	<p>An injury occurs in a company maintained parking lot (including during normal commute).</p>	✓	
3.5.2	<p>A worker is injured in a non-company maintained parking lot while in travel status.</p>	✓	



	Examples	Occ.	Non-Occ.
3.5.3	A worker is injured in a non-company maintained parking lot during a normal commute.		✓

3.6 Pre-Existing Condition

	Examples	Occ.	Non-Occ.
3.6.1	<p>A worker has a pre-existing medical condition, there is an initiating event or exposure within the work environment that aggravates the pre-existing condition, and an injury or illness results.</p> <p>Example(s):</p> <p>A worker trips and falls due to uneven ground and/or slippery surfaces, the fall causes a sprain/strain to their knee, and they have a known pre-existing knee condition.</p> <p>A worker pulls on a stuck valve causing a sprain/strain to their back, and they have a known pre-existing back condition.</p>	✓	
3.6.2	<p>A worker has a pre-existing medical condition, there is no initiating event or exposure within the work environment, and this condition merely surfaces at work (for example, epileptic seizure, dislocated shoulder or previous knee injury).</p> <p>Examples(s):</p> <p>A worker's knee gives way for no apparent reason while the worker is walking, this causes a sprain/strain to their knee, and they have a known pre-existing knee condition.</p> <p>A worker with a pre-existing back condition bends over to tie their bootlace and causes a sprain/strain to their back.</p> <p>A worker has an epileptic seizure that causes a laceration to their head, resulting in the need for sutures. Neither the seizure nor the resulting injury would be considered occupational.</p>		✓

3.7 Transportation of Personnel/Commuting

	Examples	Occ.	Non-Occ.
3.7.1	A worker sustains an injury or illness during commute to or from work on a Company-provided travel vehicle, such as a taxi, bus, airplane, or helicopter).	✓	
3.7.2	A worker sustains an injury or illness while traveling on company business using public or private transport from their normal place of residence or regular place of work to a temporary place of work, and or customer locations.	✓	

	Examples	Occ.	Non-Occ.
3.7.3	A worker sustains an injury or illness while traveling to work after being called to an emergency or meeting.	✓	
3.7.4	A worker sustains injuries or illnesses resulting from incidents involving company vehicles, excluding normal commute and personal use.	✓	
3.7.5	A worker sustains injuries or illnesses during normal commute to or from work – either by public transit, personal vehicle or company vehicle. Example(s): A worker driving from their home base to a Suncor location gets in an accident on a public road or Suncor-owned and/or maintained road prior to checking in or entering the total work establishment.		✓
3.7.6	A worker sustains an injury or illness during non-business-related travel in vehicles that are allocated to workers or contractor personnel for their personal use.		✓
3.7.7	A worker sustains an injury or illness while commuting in their own vehicle or public transportation from their home to a transfer point where they are collected, and transportation is then provided by the employer.		✓
3.7.8	A worker has checked in or entered the total work establishment, and then leaves to travel to another Suncor location. During the worker's travel to the other location, they get in an accident on either a Suncor-owned and maintained road or a public roadway.	✓	
3.7.9	A worker has checked in or entered the total work establishment and then leaves to travel to another Suncor location. During the worker's travel to the other location, they deviate from the predefined route for a personal detour and get in an accident.		✓
3.7.10	During a commute, a worker sustains injuries or illnesses when the worker is in the public areas of a building that is not owned or maintained by Suncor (the office space is leased, and the company does not directly manage or take care of the building facilities).		✓

3.8 Travel Status/ Home Away from Home

	Examples	Occ.	Non-Occ.
3.8.1	An injury on the way to or from the airport, prior to establishing a “home away from home”.	✓	
3.8.2	An injury or illness sustained by a worker at the location where they have established a “home away from home” (including normal living activities, such as eating, sleeping and recreation).		✓
3.8.3	An injury or illness sustained by a worker during the worker's normal commute to and from a work site while in travel status, when that worker has established a “home away from home” and is to report each day to a		✓



	Examples	Occ.	Non-Occ.
	fixed work site.		
3.8.4	An injury or illness sustained by an offshore rig worker during a trip to or from the rig (considered to be travel status).	✓	
3.8.5	Injuries or illnesses that occur while a worker is on a personal detour from a reasonably direct route of travel (for example, the worker has taken a side trip for personal reasons).		✓
3.8.6	A worker in travel status or who has established a “home away from home” is injured while participating in recreational activities with a customer and the activity was solely for recreational purposes.		✓
3.8.7	Injuries or illnesses sustained during off-work hours at a third-party-controlled rig, camp or lodge, by workers who have established a “home away from home” (checked into rig, camp or lodge).		✓

Working from Home

	Examples	Occ.	Non-Occ.
3.9.1	<p>Injuries or illnesses sustained while performing duties for the employer while at home, when a worker is involved in a formal documented company-sponsored program for working at home, such as graduated return to work as prescribed by Health & Wellness, if:</p> <ul style="list-style-type: none"> • The injury or illness occurs while the worker is performing work for pay of compensation in the home, and • The injury or illness is directly related to the performance of work. <p>Example: A worker is carrying a box of work documents within the area of their home that is approved for working, when they drop the box, injuring their foot.</p>	✓	
3.9.2	<p>An injury or illness occurs when a worker is not part of a formal documented work-from-home program or is informally approved by the supervisor to work from home for personal reasons.</p>		✓
3.9.3	<p>An injury or illness occurs when a worker is approved to work from home, and the injury or illness is due to the general home environment or setting.</p> <p>Example: A worker is rushing to answer a work telephone call when they trip on the family dog and fall, sustaining an injury to their arm.</p>		✓

4 Distinguishing Between Injury & Illness

Use the following descriptions and examples, organized alphabetically, to help clarify between an injury or illness classification.

4.1 Burns

	Examples	Injury	Illness
4.1.1	Contact with a heat source or a chemical that produces a burn in a single instantaneous moment or contact.	✓	
4.1.2	Contact with a heat source or a chemical that produces a burn that appears several hours after exposure.	✓	
4.1.3	A burn that results from prolonged or repeated exposure (that is, extending beyond one shift).		✓

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4.2 Exposures

	Examples	Injury	Illness
4.2.1	All conditions resulting from bites, such as insect or animal, including contagious diseases related to body contact exposure.	✓	
4.2.2	An infection resulting from a laceration.	✓	
4.2.3	Conditions resulting from a single instantaneous exposure to chemicals, metals, gases and or solvents.	✓	
4.2.4	Conditions resulting from prolonged or repeated exposure to chemicals, metals, gases and or solvents.		✓
4.2.5	A condition resulting from a direct exposure to a pathogen by a health professional in the course of their duties.		✓
4.2.6	Hearing loss that was caused by a single instantaneous event or exposure.	✓	
4.2.7	Hearing loss that was caused by a prolonged or repeated event or exposure.		✓
4.2.8	A condition resulting from exposure to high or low ambient temperatures and/or humidity in the work environment.		✓
4.2.9	Decompression sickness.		✓
4.2.10	Repeated or prolonged exposure to ionizing radiation (welding flash, ultraviolet rays, lasers) beyond one shift.		✓
4.2.11	One-time or short duration exposure to ionizing radiation (welding flash, ultraviolet rays, lasers).	✓	

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4.3 Mental Stress/Psychological Distress

	Examples	Injury	Illness
4.3.1	Traumatic onset mental stress and/or psychological distress that occurs in response to a single traumatic incident experienced by the worker.	✓	
4.3.2	Chronic onset mental stress and/or psychological distress that occurs in response to a number of prolonged or repeated stressors.		✓

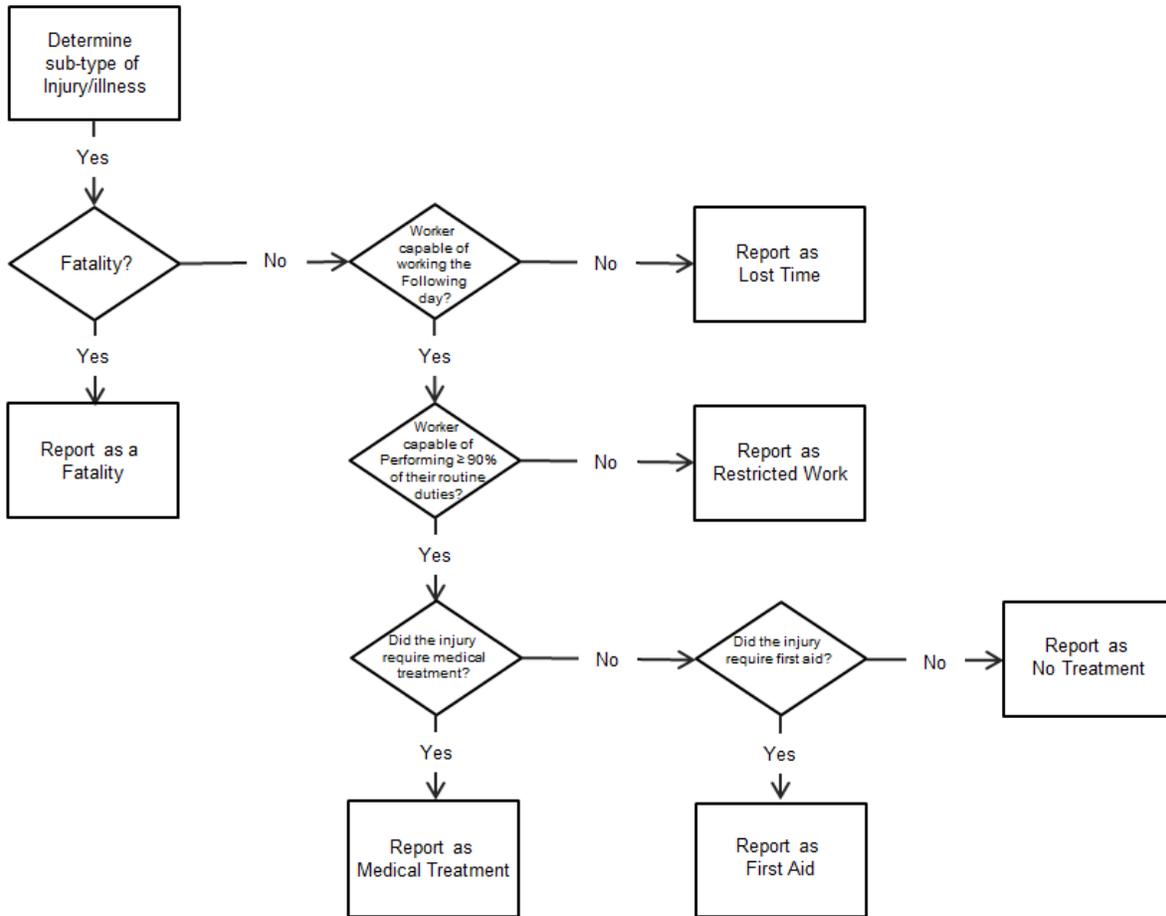
4.4 Sprains and Strains

	Examples	Injury	Illness
4.4.1	A single event, which occurs in a relatively short period of time (could be up to one shift) that produces an injury to muscles, joints and/or connective tissues. Example(s): The worker was passing scaffolding pipes up to a co-worker when one slipped out of the worker's hand. While quickly reaching to catch it, the worker felt a "pop" to his shoulder as he twisted to catch it.	✓	
4.4.2	Prolonged or repeated trauma or repetitious movement that extends beyond one shift and that produces injury to muscles, joints and/or connective tissues. Example(s): A worker passing scaffolding ledgers (pipes) up to a co-worker over several shifts started noticing soreness in their left shoulder every time they passed another ledger up.		✓



5 Injury & Illness Classification

5.1 Injury and Illness Classification Flow Chart



	Examples	FA	MT
5.1.1.1	Treatment of first-degree burns.	✓	
5.1.1.2	Treatment of second-degree burns where the total burn area(s) is less than 6.25 cm ² (1 in ²).	✓	
5.1.1.3	Treatment of second-degree burns where the total burn area(s) is greater than 6.25 cm ² (1 in ²).		✓
5.1.1.4	Treatment of any third-degree burns, regardless of size.		✓

5.2 Classification Guidance

5.2.1 Injuries and illness should be classified as one of the following:

- No Treatment
- First Aid
- Medical Treatment
- Restricted Work
- Lost Time
- Fatality

No Treatment Select 'No Treatment' if any of these conditions are true:

5.2.1.1 The assessment of the potential injury or illness initially uses diagnostic tools.

5.2.1.2 A one-time assessment of a potential injury or illness is made during a visit to a health professional where no treatment has been provided.

5.2.1.3 Any test performed by a health professional that produced a negative result.

5.2.1.4 Any non-explicit restrictions or limitations were placed on a worker by a health professional for the date of injury only.

First Aid (FA) See section 5.3 Classification Examples (First Aid and Medical Treatment)

Medical Treatment (MT) See section 5.3 Classification Examples (First Aid and Medical Treatment)

Restricted Work Assign this classification if either of the following applies:

5.2.1.5 As the result of a work-related injury or illness, a physician or other licensed health professional identifies explicit restrictions/functional limitations that limit the worker from performing their normally assigned duties and/or scheduled work hours beyond the date of the injury or illness.

5.2.1.6 That worker can perform only up to 90% of their normally assigned duties due to an occupational injury or illness. Any newly assigned work should be applicable and meaningful to the worker's regular job scope, and should be reviewed and evaluated on a regular basis.

Example 1:

A pipe fitter twists his ankle while performing pipefitting work. He is taken to a hospital, and x-rays reveal that there are no broken bones. He does not require any medical treatment (therefore this is not a medical treatment case) and a health professional allows him to return to work with explicit restrictions (No standing for more than 30 minutes) beyond the date of injury. The worker is then assigned to review drawings in a seated position. **This would be classified as Restricted Work.**

Example 2:

A welder receives a muscle strain to his leg while welding on an above-ground platform. He is assessed by a health professional but does not require medical treatment (that is, the incident is not a medical treatment case). He returns to work and is physically capable of climbing ladders to weld above ground (that is, the doctor has told him to take it easy on that leg, but hasn't indicated any restrictions). As a precautionary measure in the interest of not unnecessarily aggravating the leg, he is put to work welding pipe spools in the fabrication shop at the site. **This would NOT be classified as a Restricted Work case.**

Example 3:

A worker has sustained a minor knee strain and feels that he can return to his regular duties, but is cautioned by a health professional to avoid particularly aggravating or repetitive tasks such as climbing stairs. **This would NOT be classified as a Restricted Work case.**

Lost Time

5.2.1.7 Lost Time is when the severity of the injury is preventing the worker from reporting to work beyond the date of injury.

5.2.1.8 Lost Time is recorded when medical documentation stating that the worker is unable to work as a result of an occupational injury or illness.

Example(s):

A worker receives a puncture wound from a piece of metal and experiences symptoms of tetanus. The worker is admitted to hospital and requires ongoing medical treatment as result of this illness. The worker books off work for a period of time while this disease is treated.

A worker fractures their lower leg. The worker is assessed by a surgeon who determines surgery is required. The worker has surgery and is admitted to hospital for three days, and then books off work for four weeks.

These would both be considered an occupational injury and would be classified as lost time.

Fatality

If a fatality occurs, this classification should be assigned when:

5.2.1.9 The cause of death is confirmed as resulting from an occupational injury or illness.

5.3 Classification Examples (First Aid and Medical Treatment)

Use the following descriptions and examples, organized alphabetically, to help you determine whether an injury or illness is classified as First Aid (FA) or Medical Treatment (MT).



5.3.1 Burns

Burns are to be classified based on the treatment received. The size and degree of the burn should not drive classification. If a work related first, second, or third degree burn results in an outcome listed below it should be classified accordingly.

5.3.2 Foreign Body Removal

	Examples	FA	MT
5.3.2.1	Removal of foreign bodies that are not embedded from the eye using only irrigation, cotton swab or other simple means.	✓	
5.3.2.2	Removal of splinters or foreign material from areas other than the eye by irrigation, tweezers, cotton swabs or other simple means.	✓	
5.3.2.3	Washing or dilution of particulates or chemicals by eyewash, emergency shower or other non-invasive applications where no further treatment is required.	✓	
5.3.2.4	Removal of foreign bodies embedded in the eye by a health professional.		✓
5.3.2.5	Removal of foreign bodies from a wound, if the procedure is completed by a health professional due to the depth of embedment, size or location.		✓

5.3.3 Fractures

	Examples	FA	MT
5.3.3.1	Use of an immobilizing splint, elastic bandages, or air cast boot, where there is no fracture.	✓	
5.3.3.2	Use of an immobilizing splint or air cast boot where there is no fracture and a health professional has provided medical documentation stating that it is required for ongoing immobilization.		✓
5.3.3.3	Injuries that result in a fracture or broken bone, whether or not treatment is required or received.		✓

5.3.4 Loss of Consciousness

	Examples	FA	MT
5.3.4.1	If a worker has a confirmed loss of consciousness as the result of an occupational exposure or injury regardless of the length of time the worker is unconscious or the type of treatment provided.		✓

5.3.5 Medication

R# 3.0

	Examples	FA	MT
5.3.5.1	Use of non-prescription medications.	✓	
5.3.5.2	Administration of prescription medication(s) (one time use), by a health professional as treatment on the first visit for minor injury or discomfort.	✓	
5.3.5.3	More than one dose of a prescription medication taken as prescribed by a health professional.		✓
5.3.5.4	An adverse reaction to treatment provided as a result of an occupational incident, causing the worker to undergo further medical treatment.		✓

5.3.6 Other Treatments

R# 3.0

	Examples	FA	MT
5.3.6.1	Any medical procedure that is required as a result of an injury or illness and that can be performed only by a health care professional (physiotherapy, massage therapy, etc.).		✓
5.3.6.2	Drilling a fingernail or toenail to relieve pressure, or draining fluid from a blister.	✓	
5.3.6.3	Using eye patches.	✓	
5.3.6.4	Drinking fluids for relief of heat stress.	✓	
5.3.6.5	Soaking and hot or cold therapy (including compresses) used during initial visit to a health professional.	✓	
5.3.6.6	Soaking and hot or cold therapy (including compresses) used during a second or any subsequent visit to a health professional.		✓
5.3.6.7	Applying ointments to abrasions to prevent drying or cracking.	✓	
5.3.6.8	Any diagnostic procedure such as x-rays, or laboratory analysis that produces a positive diagnosis and that leads to further treatment.		✓
5.3.6.9	Treatment of an established infection. Example(s): A worker sustains a laceration while performing their normally assigned duties and receives treatment at a first aid level. Subsequently, the worker develops an infection to the laceration and is prescribed antibiotics as treatment.		✓
5.3.6.10	Injuries that result in chipped or broken teeth, whether or not treatment is required or received.		✓
5.3.6.11	Injuries that result in damage to a prosthetic or dental device.		✓
5.3.6.12	Injuries that result in a full or partial amputation.		✓
5.3.6.13	Worker is diagnosed with a concussion by a medical professional.		✓



	Examples	FA	MT
5.3.6.14	Worker loses consciousness as a result of an occupational exposure or injury (regardless of actual treatment provided).		✓

5.3.7 Sutures/Bandages

	Examples	FA	MT
5.3.7.1	Application of wound- covering devices such as bandages, Band-Aids, gauze pads, steri-strips during any visit by health professional.	✓	
5.3.7.2	More than one follow-up visit to a healthcare provider for minor cuts or burns if simply for observation or to change an adhesive or small bandage.	✓	
5.3.7.3	The use of finger guards.	✓	
5.3.7.4	Requirement for wound- closing devices such as butterfly bandages, sutures, staples, or liquid adhesives,		✓

5.3.8 Vaccinations

	Examples	FA	MT
5.3.8.1	Administration of tetanus shots or booster shots.	✓	
5.3.8.2	Administration of any vaccination that requires a series of shots (rabies, hepatitis, etc.) as a result of incidents occurring at the workplace.		✓

6 Corporate Adjudication Process

This section outlines the activities performed in the Corporate Adjudication Process. (The tables below summarize the process hierarchy.)

6.1 Activity Description

The Corporate Adjudication Process involves the following major activities:

- Informing BU/Function EH&S Manager about disagreement with initial incident classification.
- Reviewing the initial incident classification.
- Resolving disagreement on incident classification.

6.2 Process Details

Each Business Unit (BU)/Function (FN) should have a business process for classification of incidents. If, through the BU/FN business process, the Incident Owner does not agree with an incident classification made within their BU/FN, the Incident Owner should identify their concern with their EH&S Manager who should review the case and, if an agreement cannot be reached at the FN/BU level, escalate the incident classification to the Corporate Adjudication Committee (CAC). Follow the adjudication process below to make and communicate the adjudication decisions:

Step	Process Step	Forms	Description
10	Complete Incident Adjudication Form	Link to Incident Adjudication Form	The BU GM and/or Director completes the Incident Adjudication Form. Use the following sources to complete the form: <ul style="list-style-type: none"> • Incident Adjudication Form • Incident data captured in the IM tool
20	Submit Incident Adjudication Form		The GM and/or Director submit the completed Incident Adjudication Form to the Manager Central Investigations (that is, CAC Chair).
30	Accept request for Incident Adjudication		The CAC Chair accepts the request for incident adjudication.
40	Convene CAC & schedule review meeting		The CAC Chair convenes the adjudication team and schedules a review meeting. Members of this team include: <ul style="list-style-type: none"> • Manager Central Investigations (Chair) • Manager, Central Safety (Assistant Chair) • Health & Wellness Manager • EHS Manager RMWB • EHS Manager E&P • EHS Manager Downstream • Relevant SMEs (dependent on risk receptor)

Step	Process Step	Forms	Description
50	Review all information & classify incident		The CAC is responsible for reviewing all incident information and classifying the incident. Use the following sources in this step: <ul style="list-style-type: none"> • Incident Adjudication Form • Incident Adjudication Governance • Previous precedent in Adjudication Decision Log
60	Summarize adjudication discussion & decision		The CAC is responsible for summarizing the adjudication discussion and decision and attaching this information in the Incident Adjudication Form. The recommended timeframe to report the decision back to the BU/FN is within 30 days.
70	Send updated Adjudication Form to BU EHS GM/Director		The CAC Chair is responsible for providing the BU EH&S GM and/or Director with the CAC's recommendation for incident classification, complete with supporting documentation.
80	Archive Adjudication Form & Incident Classification Adjudication Request		The CAC Chair is responsible for archiving the Adjudication Form, Adjudication Decision Log and the Incident Classification Adjudication Request in Livelink (attach link).
90	Updated Adjudication decision reviewed by EHSLT		BU EH&S GM and/or Director reviews the CAC decision with the EH&S Leadership Team (EHSLT).
100	EHSLT makes final decision on adjudication		Based on the Incident Adjudication Form and the recommendation from the CAC, the EHSLT makes the final decision on the adjudication and informs the CAC through the: <ul style="list-style-type: none"> • Incident Adjudication Form
110	Inform Adjudication Committee of decision		The CAC is responsible for informing the BU GM and/or Director and EH&S Manager of the adjudication decision via email.
120	Accept adjudication decision		The BU GM and/or Director and EH&S Manager accept the adjudication decision.
130	Inform Incident Owner of Adjudication decision		Incident Owner accepts adjudication decision.

7 Terms and Definitions

Use the following definitions to help you understand the terms used in this document and the relevant forms.

Term	Definition
Amputation	The partial or full removal of any body part as a result of an injury or illness.
Burns	<p><u>First Degree Burns:</u> Only the outer layer of skin is damaged, characterized by reddening of the skin.</p> <p><u>Second Degree Burns:</u> Injury to the epidermis and damage to the superficial underlying tissues, characterized similarly to first-degree burns but blistering of the skin may also occur.</p> <p><u>Third Degree Burns:</u> The entire skin thickness is affected, with blackened or blanched (grey-white) skin.</p> <p><u>Fourth Degree Burns:</u> Damage extends through the subcutaneous tissue, muscle and bone.</p>
Care & Control	Ability to influence hazards in a workplace.
Chronic Onset Stress	<p>Occurs in response to:</p> <ul style="list-style-type: none"> a) An accumulation of a number of stressors over time b) A significant stressor that has lasted for a long time <p>or</p> <ul style="list-style-type: none"> c) Both a) and b) together.
Condition of Employment	Requirement identified as part of the worker's job or as an obligation requiring fulfillment from the employer.
Contractor	Any entity (other than Suncor) or individual (other than a worker of the Company) that is under contract, sub-contract and/or purchase order whose contract requires their attendance at a Suncor work environment/employer premises. "Contractors" have the responsibility for the "sub-contractors" they are directing.
Date of Injury / Illness	<p>The date/time of the injury or illness is defined as the date/time that the worker sustained the injury or illness and not the date/time when it was reported or brought to the attention of Suncor. If the severity of the injury or illness changes, the date/time of the event does not change.</p> <p>If the worker is injured during a night shift, the date/time of the injury would be the actual day of injury not the date/time of the night shift.</p>

Term	Definition
Employment	An activity that furthers the interests of an employer. Employment includes all work or activity performed in carrying out an assignment for or at the request of Suncor, including related activities (such as travelling) not specifically covered by the assignment or request. Employment also includes activities undertaken at Suncor’s request or for company business reasons, outside of normal working hours.
Explicit Restrictions/Functional Limitations	<p>Restrictions and/or limitations, prescribed by a physician and or other licensed health professional, that are both specific and measurable and that directly impact the worker’s ability to perform their normally assigned duties/tasks.</p> <p>Explicit Restrictions are when medical documentation explicitly states the restriction(s) with statements such as the following examples:</p> <ul style="list-style-type: none"> • No lifting greater than 10lbs • No sitting > 20 minutes • No standing > 3 hours • No bending/twisting below the waist • Worker cleared to work 3-hour shifts/3 days a week <p>Non-Explicit Restrictions:</p> <p>The following “non-explicit restrictions” may require further review to understand the limitations or allow consideration of safe and appropriate work accommodation. Classification may be deferred until explicit restrictions are clarified or can be obtained from the worker’s health professional.</p> <p>Medical documentation may use vague statements in regards to restrictions such as:</p> <ul style="list-style-type: none"> • Recommend light duties • “Take it easy for the next few days” • Elevate your leg as needed • Reduce hours • Work as tolerated
Fatality	<p>Any death resulting from an occupational injury or illness.</p> <p>Fatality cases are recorded as lost time injuries or illnesses for the purposes of the frequency and severity calculations. Lost days in relation to a fatality will be capped at 180 days for purposes of the Frequency & Severity statistical reporting.</p>
First Aid	Limited to any one time treatment, and subsequent observation, of minor scratches, cuts, burns, splinters, etc., which do not require medical care or further medical treatment even though it may have been provided by a physician or another registered health professional.
Health Professional	A person who is legally authorized to practice an occupation or profession related to health care services as a registered, licensed health practitioner, governed by the law, including but not limited to, physicians, registered nurse, nurse practitioners, chiropractors, physiotherapists, dentists, optometrists, clinical psychologists.



Term	Definition
Home Away from Home	A temporary accommodation for a worker. When a worker in travel status checks into temporary accommodation (hotel/motel, camps or lodges, offshore drilling rigs, etc.), that worker establishes a “home away from home.”
Loss of Consciousness	A state that occurs when the ability to maintain an awareness of self and environment is lost, no matter how brief, it involves a complete or near-complete lack of responsiveness to people and other environmental stimuli.
Lost Time	Any occupational injury or illness that renders the worker temporarily unable to perform any regular job or restricted work activity on any day (including normal days off, holidays, etc.) after the day on which the injury occurred.
Lost Time Days	The number of calendar days the worker was unable to work as a result of an injury or illness regardless of whether the worker was scheduled to work the day or days following the injury. The day of injury or illness is not counted as a lost day. Weekend days, holidays, vacation days or other days are included in the total number of recorded lost days. In cases where employment is terminated, this total number of recorded lost days includes any previously scheduled work days that were planned prior to the event, or an estimate of work days that would be lost after termination. Cap the total number of lost days recorded for an injury or illness or fatality at 180 calendar days.
Medical Treatment	Any injury or illness that requires medical treatment administered by a physician or other licensed health professionals that go beyond first aid, including cases where medical treatment is clearly required but was not provided or was refused. This type of treatment does not include first-aid-level treatment even though it was provided by a physician or another registered health professional.

Term	Definition
Mental Stress / Psychological Distress	<p>An individual's non-specific physical and psychological response to events or life changes that occur. These events are known as stressors.</p> <p>Some level of stress is a normal part of life; however, when a person's ability to cope with the stressors is overwhelmed, a negative form of mental stress called distress can develop.</p> <p>A traumatic incident(s) is defined as a direct personal experience of an event or directly witnessing an event that, when reasonably and objectively assessed and meets all of the following criteria:</p> <ul style="list-style-type: none"> • is sudden • is frightening or shocking • has a specific time and place and, • involves actual or threatened death or serious injury to oneself or others. <p>Chronic onset psychological distress is defined as an emotional reaction to:</p> <ul style="list-style-type: none"> • an accumulation, over time, of a number of work-related stressors that do not fit the definition of a traumatic incident • a significant work-related stressor that has lasted for a long time and does not fit the definition of a traumatic incident • work-related events that are excessive or unusual in comparison to the normal pressures and tensions experienced by the average worker in a similar occupation and there is objective confirmation of the events. Normal pressures and tensions, to which all workers may be subject from time to time, include but are not limited to: interpersonal relations and conflicts; health and safety concerns; union issues; and routine labour relations actions taken by the employer, including workload and deadlines, work evaluation, performance management (discipline), transfers, changes in job duties, lay-offs, demotions, terminations, and reorganizations.
No Treatment	<p>Limited to the one-time observation and assessment of an injury or illness where no first aid or medical treatment has been provided.</p> <p>In the event the worker requires treatment or ongoing assessment of the injury or illness, the classification will be upgraded accordingly.</p>
Non-Occupational	<p>Injuries or Illnesses that result solely from incidents not related to the workplace or work.</p> <p>Note: If there is any doubt as to whether an injury or illness is occupational, it should be reported, and the health professionals will make a confidential decision.</p>

Term	Definition
Non-Suncor Incident	<p>An incident not owned by Suncor.</p> <p>All incidents should be reported and assessed for whether or not they are a Suncor or non-Suncor incident. If a determination is made that the incident is owned by a mode 3 contractor, then you do not need to enter or track the incident in the Suncor Incident Management Corrective Action Tool. Suncor has no responsibility to non-Suncor incidents.</p>
Occupational	<p>A case is presumed occupational if the event or exposure in the work environment was the discernible cause of the injury or illness, regardless of where signs or symptoms surface.</p>
 Occupational Illness	<p>Any outcome from prolonged or repeated events (beyond one shift) on the body systems or parts of a person that results in physical, chemical or psychological change.</p>
Occupational Injury	<p>Any outcome from an instantaneous single event in the body of a person that results in physical, chemical or psychological change.</p>
Pending Lost Time	<p>An injury or illness that has been reported for which there is a possibility that the classification attached may result in a Lost Time Classification. For example: the worker was sent to a hospital or physician for assessment after first aid and/or medical treatment was provided, where there is possibility that the outcome of the assessment and further treatment would constitute a Lost Time Classification. This is a temporary classification that should be reviewed within 24 hours to determine the correct classification.</p>
Pending Medical Treatment	<p>An injury or illness that has been reported for which there is a possibility that the classification attached may result in a Medical Treatment Classification. For example, the worker was sent to a hospital or physician for assessment after first aid treatment was provided where there is possibility that the medical services would constitute a Medical Treatment Classification. This is a classification temporary that should be reviewed within 24 hours to determine the correct classification.</p>

Term	Definition
Pre-existing Medical Condition	<p>An injury or illness is a pre-existing condition if it resulted solely from a non-work-related event or exposure that occurred outside the work environment.</p> <p>Pre-existing conditions also include any injury or illness that the employee experienced while working for another employer. Pre-existing conditions usually do not affect reportability except when the injury or illness is significantly aggravated by another work-related event.</p> <p>For the injury or illness to be considered pre-existing, documentation for the ongoing treatment of the condition should be provided.</p> <p>If injury or illness results solely from a physical defect (for example, an employee falls while walking when a previously aggravated knee gives way AND there is no environmental factor), it is not reportable. However, if the work environment or a work event contributes to the injury or illness (for example, a worker steps on a stone or slips, a previously aggravated knee gives way and the worker falls), any resulting injury or illness is reportable.</p> <p>Any injury or illness that occurs as a result of a pre-existing condition with no environmental or work-related factor contributing to the injury/illness is not considered reportable. For example, a worker suffers an epileptic seizure (pre-existing condition), falls and breaks their arm; the broken arm is not reportable as it was a result of the pre-existing condition.</p>
Prescription Medication	<p>A medication that is prescribed by a licensed health professional, such as a doctor, dentist, nurse practitioner or physician's assistant.</p>
Restricted Work	<p>Restricted work occurs when, as the result of a work-related injury or illness, a physician or other licensed health professional identifies explicit restrictions and/or functional limitations that limit the worker to performing 90% or less of their normally assigned duties and/or scheduled work hours beyond the date of the injury or illness.</p>
Restricted Work Days	<p>Equals the number of calendar days that the worker was unable to perform their regular duties as a result of an injury or illness as defined in restricted work definition.</p> <p>The day of injury or illness is not counted as a restricted workday. Weekend days, holidays, vacation days or other days off are included in the total number of days recorded if a worker is required to be on restricted work as a result of an injury or illness. Cap the total number of restricted workdays at 180 calendar days.</p> <p>When modified work is provided following a period of lost workdays, the modified workdays are recorded in addition to the number of lost workdays. If the incident occurs prior to the termination of the contract, the number of days accountable as restricted work is as estimated by a health professional.</p>
Shift	<p>One work day, regardless of hours and including overtime (i.e. 8 hours, 10 hours, 12 hours, 16 hours), up to the regulatory maximum allowable in the area applicable to the worker.</p>





Term	Definition
Traumatic Onset Stress	Occurs in response to a single traumatic work-related incident that is sudden, as well as frightening or shocking, and has a specific time and place. Acute Stress Disorders and Post-Traumatic Stress Disorders can result. (See also Mental Stress / Psychological Distress.)
Travel Status	<p>Any travel between a worker's residence and a point outside of the worker's normal geographic area of operation that is not considered a normal commute but is considered work-related.</p> <p>Workers who travel on company business are considered to be in travel status when they are engaging in work-related activities in the interest of the company outside of their normal geographic area of operation.</p> <p>A worker's "normal geographic area of operation" includes the town/city or work site where the worker normally works.</p>
Work Environment	<p>The establishment and other locations where one or more workers are working or are present as a condition of employment. The work environment includes not only physical locations, but also the equipment or materials used by a worker during the course of the work.</p> <p>The employer premises consist of the total establishment. This includes the primary work facility and other areas that are considered part of the employer's general work area. (For example: common foyers, entryways, sidewalks, stairwells, parking lots, camps company owned and/or operated roads, etc.)</p> <p>Note: This definition means an employee carries a work environment 'bubble' with them wherever they perform duties as a condition of their employment.</p>

8 References

The list below outlines the documents that should be read with this document for a full understanding:

- Canadian Association of Petroleum Producers. (2013). Guide: Health and Safety Performance Reporting. (CAPP-2-13-0029).
- International Association of Oil & Gas Producers. (2014). OGP: Safety data reporting users' guide, 2013 data. Report No. 2013su.
- U.S. Department of Labor, Occupational Safety and Health Administration. (2014). Updates to OSHA's Recordkeeping Rule. Retrieved from <http://www.osha.gov/recordkeeping2014/>
- U.S. Department of Labor, Occupational Safety and Health Administration. (2015). OSHA Injury and Illness Recordkeeping and Reporting Requirements. Retrieved from <https://www.osha.gov/recordkeeping/index.html>
- Relevant state/provincial/territorial Workers' Compensation Board policies and regulations.



A1 Appendix A - Incident Adjudication Form [Template](#)

General Information			
Incident Number:		Incident Date:	
<u>Description of Incident:</u>			
<u>Issue/concern (why is it brought to corporate adjudication?):</u>			
Request for Adjudication			
BU/FN EHS Manager		Signature:	
Date of adjudication request:			
Incident Information (Pre Adjudication)			
Incident Owner:		Incident Area/Location:	
Classification Pre-Adjudication:			
Adjudication Information:			
Adjudication Date:		Adjudication Location:	
Adjudication Chair:		Adjudication Team Members:	
Adjudication Recommendation			



Adjudication Recommendation and Rationale:

Incident Information (Post Adjudication)

Incident Owner:		Incident Area/Location:	
Classification Post-Adjudication:			

Final Decision

Approved by: (BU Director EH&S)	Signed:	Date:
Approved by: (VP EH&S)	Signed:	Date:



The following individuals have approved and signed this document.

UserName: Michael Agnew (magnew)

Title: VP EH&S

Date: Monday, 08 May 2017, 07:57 AM Mountain Time

Meaning: I approve this document

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