

SCHEDULE 2 EMPLOYERS' GROUP

Via email Consultation_Secretariat@wsib.on.ca

January 30, 2026

Consultation Secretariat
WSIB
200 Front St. West
Toronto, Ontario MSV3J1

Re: Stakeholder Feedback on Draft Noise Induced Hearing Loss (NIHL) Policy

On behalf of the Schedule 2 Employers' Group (S2EG), we appreciate the opportunity to provide feedback on WSIB's draft policy regarding Noise-Induced Hearing Loss (NIHL).

S2EG represent an inclusive group where relationship and collaboration built a community, providing premium-quality education to both public and private sector organizations that relate to workers' compensation, disability management, health & safety, and workplace wellness. Schedule 2 Employers are in a unique position as fully self-insured stakeholders, and we recognize the importance of ensuring fair and consistent adjudication for workers while maintaining clarity and predictability for employers.

We support WSIB's goal of updating the NIHL policy and improving consistency in decision-making. However, some of the proposed changes raise concerns for Schedule 2 Employers, who are directly responsible for the full cost of claims. Any policy changes may significantly impact cost predictability, evidentiary expectations, and employer accountability.

The S2EG supports modernization, but clarity and fairness remain essential.

Suggested Clarifications

- Maintain a strong focus on workplace-specific actual noise exposure evidence rather than generalized assumptions.
- Ensure age-related and non-occupational factors (e.g., hobbies, environmental exposure) are fully taken into account in adjudication.
- Provide clear guidance on shared responsibility when multiple employers contributed to exposure.
- Uphold objective medical and audiological standards for entitlement decisions.
- Clarify application of the policy to existing claims to avoid retroactive uncertainty.

1. Cost and Predictability

Schedule 2 Employers bear the full cost of their allowed claims and the risk of increased cost if entitlement criteria broaden without corresponding attention. Any expansion of entitlement without defined limits could lead to undesirable unpredictable and escalating costs, complicating financial planning and risk management. Schedule 2 Employers need stability for long-term forecasting and planning.

Recommendation: Define clear eligibility criteria and cost-sharing mechanisms to maintain predictability.

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2. Workplace-Specific Evidence

The proposed approach appears to rely on assumptions about noisy occupations. Actual workplace-specific noise monitoring data is a more reliable indicator of causation than occupation-level assumptions and should, therefore, be relied upon as the standard adjudicative process. In circumstances where exposure is intermittent or limited in duration (for example, one day per five-day work cycle), does this alter the causal nexus, and how should this be reflected in the standard of proof required?

Recommendation: Continue prioritizing scientific, evidence-based assessments and require documented workplace-specific exposure whenever possible.

3. Multiple Employers and Other Contributing Factors

Hearing loss typically develops over decades and may involve exposure across multiple workplaces, non-work activities, and aging. Considering factors such as age-related hearing loss, recreational noise, and cumulative lifetime exposure.

Recommendations:

- Require adjudicators to fully analyze alternative causes and consider all contributing factors.
- Clarify how Section 94 of the Act applies when multiple Schedule 2 Employers are involved, including proportional cost allocation.
- Address scenarios involving Schedule 1 and Schedule 2 Employers and define fairness principles for cost-allocation.
- Establish a baseline for environmental exposure to ensure consistency.

4. Fair Allocation of Responsibility

Without clear guidance, a single employer could be held liable for cumulative exposure spanning multiple jobs. The policy should provide clear guidance on how responsibility is shared. Without this, there is a risk that a single Schedule 2 Employer could be held responsible for hearing loss that developed over a much longer period.

Recommendation: Develop a transparent framework for apportioning responsibility among employers in gradual-onset cases.

5. Medical and Testing Standards

Consistency in medical and audiological criteria is critical. Reducing emphasis on baseline testing or NIHL-specific patterns could lead to inconsistent and unsupported decisions. Objective clinical criteria protect both workers and employers.

Recommendation: Retain objective standards, including timelines and characteristic audiogram patterns.

6. Retroactive Impact

Employers are concerned about reopening denied claims or retroactive application of new rules with potential financial and administrative burden of retroactive application.

Recommendation: Confirm that changes apply only to new claims adjudicated on or after the policy's effective date.

We also encourage WSIB to address additional considerations such as age-related hearing loss, hearing protection device documentation, and compliance standards for audiograms. These

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clarifications will help ensure fairness, consistency, and predictability for all stakeholders.

Additional Considerations

- **Section 94 Provisions:** Ensure clarity on employer responsibilities when occupational disease results from multiple employments.
- **Scientific Basis:** Confirm whether 2018–2019 research remains valid and address risks associated with hobbies or other non-work factors.
- **Age-Related Loss:** Avoid fixed correction factors; evaluate age-related changes in the context of individual claims. Consider retaining the current method (0.5 deduction/year of age) as the standard, unless the unique circumstances of a particular worker's medical evidence can support that the deduction should not apply. This also avoids the proposed 'overwhelms' methodology.
 - Data from the Canadian Health Measures Survey (CHMS) and [Canadian Hearing Services](#)¹ show that audiometrically measured hearing loss becomes increasingly prevalent with age among Canadian adults, highlighting age as a significant non-occupational factor; [Statistics Canada: Hearing health of Canadian adults](#)².
- **Hearing Protection Devices (HPDs):** Consider terminology alignment (e.g., PPE) and clarify expectations for documentation.
 - Decision-making should include consideration of applicable Canadian Standards rating and the effectiveness of hearing protection equipment, including Noise Reduction Rating (NNR).
- **Non-Economic Loss (NEL):** Explain cost implications of removing presbycusis adjustments.
- **Audiogram Standards:** Define compliance requirements and clarify whether WSIB will cover costs for incomplete or non-compliant assessments.
- **The age-related component of hearing loss** has been addressed in [Dr. John Rutka's medical discussion paper](#)³ prepared for WSIAT, which outlines the distinctions between noise-induced and age-related hearing loss based on audiogram findings. Recommend that the WSIB incorporate the audiogram standards identified by Dr. Rutka into its adjudicative framework. This guidance could be formalized within a reference document, such as an Adjudicative Practice Document.

Policy-Specific Observations

This section summarizes key observations related to the *Assessing Evidentiary Requirements* components of the draft policy. While scientific context is valuable, consideration should be given to whether technical explanations are best embedded directly within the policy or provided separately as supporting resources materials.

Key Observations

- **Claims Meeting or Exceeding NET:** The section currently makes no reference to OHS standards. Consider whether an OHS citation would strengthen clarity or alignment with industry benchmarks.
- **Combined Exposure:** The term *ototoxic substances* should be explicitly defined within the policy to ensure consistent interpretations and application.
- **Use of Industry-Wide Data:** Industry-wide or general noise-level data should only be used when credible, workplace-specific information cannot be obtained.

¹ Hearing Loss, Canadian Hearing Services, <https://www.chs.ca/hearing-loss>

² Hearing Health of Canadian Adults, Government of Canada, October 20, 2021, <https://www150.statcan.gc.ca/n1/pub/11-627-m/11-627-m2021077-eng.htm>

³ Hearing Loss and Tinnitus, Workplace Safety and Insurance Appeals Tribunal, July 2013, <https://www.wsiat.ca/en/MedicalDiscussionPapers/hearingloss.pdf>

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- **Non-Occupational Noise Exposure:** Additional details are needed on how WSIB will determine and evaluate potential non-occupational noise exposures (e.g., recreational activities or hobbies).
- **Calculation of Compensable Impairment:** While the section is generally clear, including an example of “pre-existing conditions not related to non-work-related noise exposure” would support consistent adjudication (e.g., genetic conditions).

While practice documents are not part of the policy document, it may be helpful to either incorporate or make reference to current, more comprehensive resources, such as those provided in the “Consultation note for draft Operational Policy Manual (OPM) document 16-0104 Noise-Induced Hearing Loss which accompanied the draft policy in the consultation package. It would be of great assistance to WSIB staff, system partners and stakeholders (healthcare providers, worker and employer groups) to have this document updated and reissued during this consultation/review period.

Thank you for considering our input.

We look forward to continued collaboration and remain committed to working together toward a fair, evidence-based NIHL policy that effectively balances the interests of workers, provides clarity for employers, and strengthens the broader system.

Yours truly,



Laura Russell, B.Sc. CRSP
Chair, Schedule 2 Employers' Group