



QUEENSLAND EMPLOYERS' GUIDE

FOR REDUCING WORKERS' COMPENSATION COST

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This guide has been developed by the Australian Industry Group. WorkCover Queensland and Q-COMP assisted with the development of this documentation. □

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The purpose of the guide is to heighten the level of awareness and knowledge of the Queensland workers' compensation claims management process amongst Queensland employers. Material in this documentation was current at the date of publishing and is to be used as a guide only.

STRATEGIES FOR REDUCING WORKER'S COMPENSATION COST AN EMPLOYERS' GUIDE

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Importance of implementing strategies for the reduction of workers' compensation costs

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FORWARD

Good workplace health and safety management practices will ensure fewer accidents and lower workers' compensation costs for Queensland employers.

The Australian Industry Group (Ai Group) has consistently been at the forefront in supporting employer's interest in the area of workplace health and safety and injury management for workers on worker's compensation benefits. Our close relationship with our members and Queensland industry as a whole, ensures that Ai Group is able to monitor the effectiveness of these management strategies within industry, and ensures that appropriate representation, which reflects the needs of industry is made to the State Government, including WorkCover and the Division of Workplace Health and Safety.

Controlling the occurrence of workplace injuries is good for business. The benefits can include:

- ❑ Reduced WorkCover premium rates for you and your industry;
- ❑ Reduction of WorkCover premium costs on your business;
- ❑ Increased productivity through better industrial relations and improved morale;
- ❑ Less disruption to the operation of your business; and
- ❑ Decreased work absence.

Minimising the number of work related injuries is the primary element in controlling costs but when injuries occur, costs can be contained with effective claims reporting and early rehabilitation for the injured worker. This Guide is designed to ensure that employers have available an easy and practical reference to the management of safety and workers compensation. It has been prepared to ensure that information is available to enable employers to effectively manage these important areas.

Ai Group aims to assist Queensland employers to reduce the number and severity of work injuries through assisting employers to establish and maintain effective safety and workers compensation management programs. In addition to this Guide, Ai Group also provides a broad range of support services including consultancy, telephone advice, training and seminars on these important issues.

Employers have an opportunity to contribute to reduced costs of work-related injuries through the effective pursuit of zero injury policies, implementation of an effective industry-based rehabilitation program, having appropriate early claims reporting and management systems in place and providing effective rehabilitation services to their injured workers to aid their early and appropriate return to work.

This Guide addresses these and other injury and claims management issues.

Ai Group commends the Guide to you.

INTRODUCTION

How Do I Manage My Claims Costs?

Statutory Claims

The number and cost of claims you have in your business will ultimately affect the amount of premium you pay. The best way to control your premium costs is to prevent workplace injuries and illness. Accordingly, the first step in reducing and managing your claims costs is to take a proactive approach and prevent them from occurring in the first place. Employers should develop and implement an effective workplace health and safety program that identifies the risks and manages them successfully to reduce injury in the workplace.

If an injury does happen, the best outcome is to help your injured worker to get back to work as quickly and as safely as possible through rehabilitation and good communication with all involved. The length of time it takes a worker to get back to work is a major driver of claim costs. If you can help your worker with suitable duties, the claim cost against your policy and the premium you pay will be reduced, ie. if a worker is on suitable duties with medical clearance, this could reduce the amount of weekly benefits paid by WorkCover.

Workplace rehabilitation brings injured workers back to the workplace in the safest and quickest way possible, through suitable duties or other rehabilitation program or vocational re-direction if the injured worker is unable to return to their previous job/employment. Effective workplace rehabilitation can reduce the duration of a claim, the costs incurred by the employer due to the loss of a worker and the impact this may have on your workers' compensation premiums.

Workplace rehabilitation can also help to maintain a skilled workforce, reduce staff replacement and retraining costs, maintain staff morale and improve productivity.

In addition, making sure you lodge your WorkCover Employer's Report Form as soon as possible after the injury, may help you to minimise a claims' impact on your premium. Delays in lodging documents can cause an increase in the cost of the claim.

Common Law

Research in Queensland has shown that the way employers treat their workers following an injury is one of the main reasons people make common law claims. A good working relationship often becomes strained following a workplace injury and deteriorates further once a common law claim is made.

Employer's need to:

- Understand the nature and application of employer's liability and the premium impact that flows from a common law claim; and
- Embrace and understand the importance of what can be done to help their injured workers and to mitigate the frequency and value of common law claims.

Market research of common law claimants gives a very good indication of the magnitude of rehabilitation issues facing WorkCover and employers, for example:

- More than one-third of injured workers did not return to work after their injury;
- Employers did not offer suitable duties in almost 60% of cases;
- Three quarters are no longer working for the policy-holder that harmed them;
- Half had left the employer at the time of injury when they decided to make a common law claim.

It is important for employers to keep their workers employed following an injury and to ensure they are given suitable duties while they are rehabilitated or retrained. This will result in durable return to work outcomes. This is the best control an employer can exercise over their premium costs. Dismissing an injured

worker is considered a shortsighted response from employers and will result in a high certainty of a common law claim and increased premium costs.

Ai Group believes the more empathy and understanding an employer has for their injured worker and their situation, then fewer common law claims will emerge and these will be settled for a lesser amounts with reduced impact on an employer's premium.

Who Should Use This Guide?

This guide is primarily for employers and is useful to both large and small companies wishing to reduce the worker's compensation claims costs.

Employees may find this guide useful as well. It helps employers and employees meet their responsibility to ensure a healthy and safe workplace and an early return to work of an injured worker.

Aims Of The Guide

The guide aims to:

- ❑ Raise awareness about health and safety issues and the return to work program;
- ❑ Help identify and overcome issues that may impact on an early return to work;
- ❑ Offer solutions and advice on the management of worker's compensation claims;
- ❑ Aid consultation on safety and workers' compensation issues between all stakeholders; and
- ❑ Inform and help both employers and employees in appropriate claims management.

SETTING UP A SAFETY MANAGEMENT PROGRAM

How Do You Start?

As an employer, you are required to “ensure the safety of your workers and others” under the *Workplace Health and Safety Act, 1995*. This can be achieved through the adoption of a safety management program. The purposes of a safety management program are to ensure that a company is aware of, and manages, the health and safety risks associated with their industry.

The program should look at issues such as the organisational structure for managing health and safety risks, as well as the development of appropriate policies and procedures. A successful program will require the allocation of responsibilities and designing, implementing, monitoring and evaluating procedures and performance standards. The risk management process is fundamental to the success of the program.

A safety management program consisting of the following basic principles, which should support this risk management approach:

- Managers must show commitment and provide leadership for the safety program;
- Managers should be allocated specific responsibilities for ensuring the health and safety of employees;
- A health and safety committee should be established with management and employees equally represented;
- A safety inspection program and hazard reporting system should be introduced;
- A system of recording and investigating accidents and injuries should be established;
- Adequate first aid facilities should be provided;
- Employees must be informed of their responsibilities for safety.

Although you may have a complete safety program working effectively, you may however be required to process claims for injuries sustained by employees whilst at work or on the way to or from work. In order to process these claims in an efficient manner you will have to devise an efficient claims management system. Such a system will ensure that injured employees receive appropriate and immediate medical attention and rehabilitation, and receive their workers' compensation benefits as quickly as possible, thus ensuring the impact on an employer's workers' compensation premium is kept to a minimum. A claims management system should incorporate the measures necessary to cater for the following:

- Accurate wage records kept and accessible;
- Wage records maintained for 7 years;
- Employers' Report Form being forwarded to WorkCover within 10 days;
- Efficient and confidential filing system for claims;
- Actively manage all claims by liaising on each claim with the WorkCover contact within the Claims Office, treating medical practitioner and rehabilitation provider;
- Provide suitable duties for injured workers;
- Maintain a record of injuries;
- Ensure the self employed have an appropriate and current injury insurance policy.

Further Information

www.whs.qld.gov.au

www.aigroup.asn.au

www.workcoverqld.com.au

INJURY REPORTING AND INVESTIGATION

What Is A ‘Serious Bodily Injury’?

This is an injury that causes death or impairs a person to such an extent that he or she becomes an overnight or longer stay patient in a hospital.

What Is A ‘Dangerous Event’?

This is an event at a workplace involving imminent risk of explosion, fire or serious bodily injury, ie. a “near miss”.

What Is A ‘Work Injury’?

This is an injury to an employer, self-employed person or worker in the course of work, which requires first aid or medical treatment – this includes a recurrence, aggravation, acceleration, exacerbation or deterioration of any existing injury.

What Are The Legislative Requirements For Reporting, Recording And Investigating?

The employer must:

- Complete an Accident/Incident Report Form no later than three days after the event and keep the form at the workplace for future reference. Serious bodily injuries may also be recorded on this form;
- Maintain a copy of the accident report form at the work site;
- Implement a reporting system to notify the Division of Workplace Health and Safety of a serious bodily injury, a work caused illness, dangerous event or death within 24 hours. A death must be notified immediately;
- Initiate an investigation as soon as possible after the event and record the investigation. This record should include:
 - Name of the injured person;
 - Date of the injury;
 - Type of injury;
 - Where it occurred;
 - How it occurred; and
 - Details of first aid and medical attention provided.

In the event of any of the above workplace incidents occurring, the scene connected to the incident must not be interfered with, without the permission of an inspector from the Division of Workplace Health and Safety or, if an inspector is not available, a police officer. To interfere with an incident scene may destroy valuable evidence, and breaches legislative requirements. Interference is only allowed when it is necessary to save life, relieve suffering, prevent injury to a person, or to prevent property damage.

Why Is Accident Reporting And Recording Important?

Reporting and recording accidents and incidents is important for the following reasons:

- Trends can be detected and analysed;
- Unknown hazards can be identified;
- Useful risk management data for the company can be gained;
- Records can help with workers’ compensation claims if they have been kept from the outset;
- It is a requirement under the workplace health and safety legislation.

Why Is Accident Investigation Important?

Investigating accidents and incidents is important as it provides essential information to allow the prevention of similar types of accidents/incidents. For the investigation process to be effective, all aspects involved with the accident/incident need to be examined. It is important that these investigations focus on collecting factual information, without assigning blame to those involved.

The key benefits of investigation include:

- ❑ Allows a comprehensive assessment of the work practices and systems to be carried out;
- ❑ Areas of information or communication breakdown can be identified and remedied;
- ❑ Preventive strategies can be identified and implemented;
- ❑ Safe work procedures can be developed and documented; and
- ❑ Training needs can be identified.

How To Conduct An Accident Investigation?

- ❑ The person undertaking the investigation should attend the scene before any physical evidence is disturbed, removed, altered or obliterated;
- ❑ Take comprehensive details describing the accident scene, ie. sketches, photographs, etc;
- ❑ Take samples of unknown products, liquids, vapours, dusts, mists, etc. if possible;
- ❑ Identify key personnel:
 - Who were aware of the preconditions;
 - Who saw the accident in progress; and
 - Who saw immediate post accident events?
- ❑ Conduct interviews individually with eyewitnesses and injured person/s (if possible);
- ❑ Document responses and evidence obtained and determine the immediate cause that contributed to the accident;
- ❑ Determine which management system could have failed to avert this accident;
- ❑ Implement corrective action – for each identified management system failure, at least one corrective action should result from each management system identified;
- ❑ Document and review corrective action.

What Are My WorkCover Obligations?

WorkCover Queensland must also be notified of any workplace injury within 10 days of the occurrence or on notification using the Employers Report Form.

Further Information

www.whs.qld.gov.au

www.workcoverqld.com.au

EFFECTIVE INJURY TREATMENT – FIRST AID

Why Is First Aid Important?

The provision of effective first aid to an injured person is essential for the alleviation of suffering, and prevention of infection. In this way, the health and safety of employees, and others at the workplace is ensured. First aid intervention seeks to minimise the aggravation of an injury after it has occurred. As such the benefits of this to the worker and the employer include:

- ❑ Reduced costs of rehabilitation;
- ❑ Less time off work;
- ❑ An improved healing process.

If a worker does sustain an injury at work it is imperative that immediate action is taken to minimise the severity of the injury and assist in the injured worker's recovery.

When the body is injured internal tissues may also be damaged, thereby leading to bleeding into the internal tissues. When this bleeding occurs near the skin bruising may occur. This bruising may appear soon after the injury or it may occur deep into the tissue, and discoloration may take much longer or may not appear at all. The greater the amount of initial bleeding the longer the body will take to completely recuperate. Therefore, it is essential to minimise the amount of initial bleeding and secondary swelling that may result from injuries. This can be achieved by using the **RICER** principle.

Rest

Continued movement of an injured part in the first 48 hours leads to continued bleeding. By resting the injured part, bleeding into the tissue is minimised. The maximum amount of rest is achieved by immobilisation of the injured limb, or if it is the trunk of the body that is injured, by lying flat. The minor injury, immobilisation is continued beyond 48 hours, except under specific medical instructions. Prolonged immobilisation of the hands and fingers can lead to joint stiffness.

Ice

The application of cold to the skin surface overlying an injury reduces pain, swelling and bleeding into the deep tissues. Cold has an anaesthetic effect on the skin and is capable of reducing the underlying blood flow. Ice should not be placed directly in contact with the skin, but should be applied as a cold compress, by wrapping crushed ice in a cold, wet cloth.

Compression

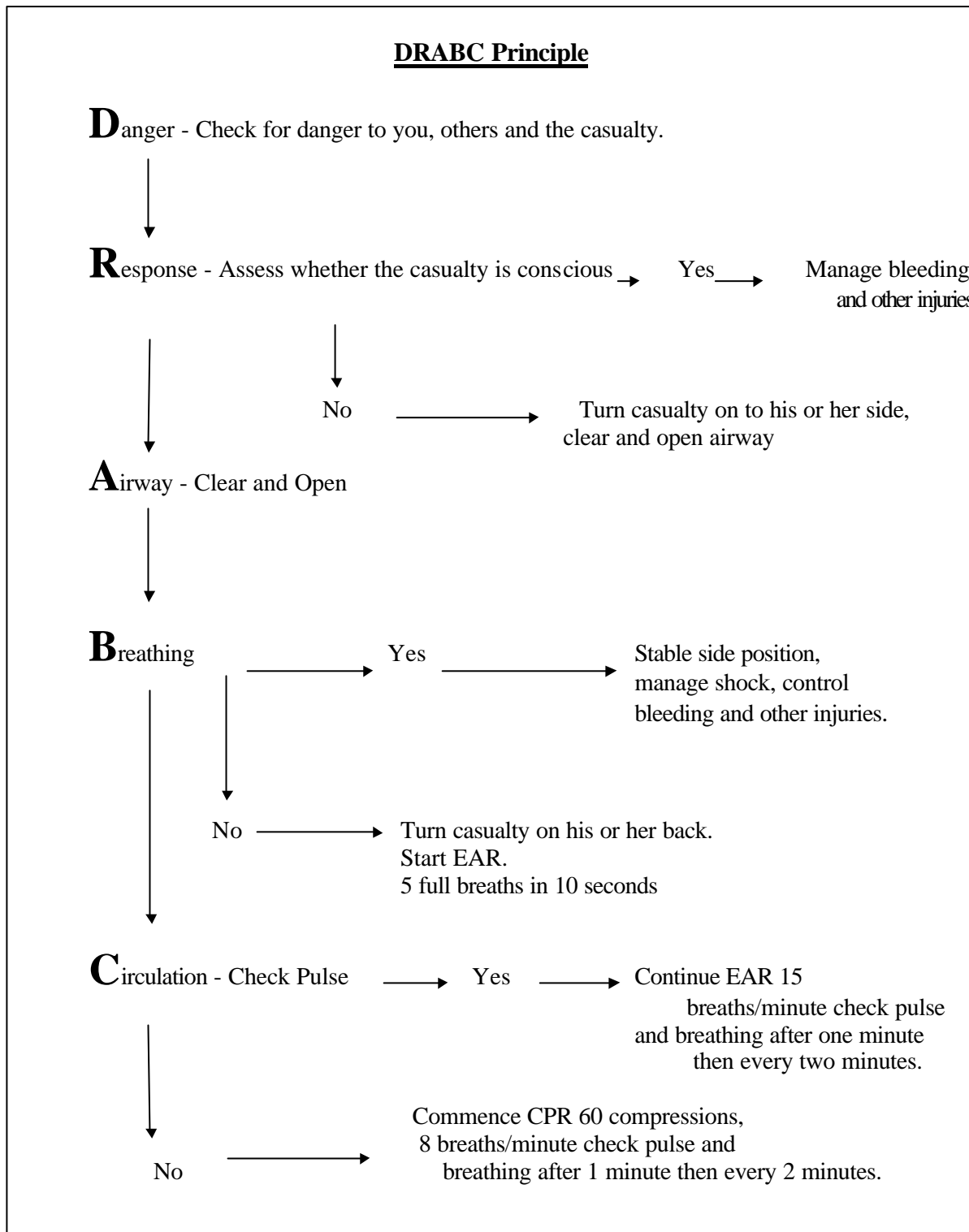
Compression acts by limiting bleeding through direct pressure and limiting the accumulation of fluid in the tissue spaces and joint cavities. It can be achieved by using a correctly applied padded bandage or by use of an inflated splint.

Elevation

Elevation limits bleeding by the effect of gravity reducing blood flow and limits swelling by increasing venous drainage of the elevated part. To be effective, the injured part must be raised to a level above the heart. There must be no obstruction to the venous flow back to the heart.

Refer

It is essential at this stage to refer the injured person to a medical professional for further assessment. The referral of the injured person at the earliest possible opportunity assists with the continual management of soft tissue injuries, and alleviates the stresses imposed, and assists in the regeneration of the tissue.



Further Information

St John Ambulance Australia

NOTIFYING WORKCOVER

The Claims Process

Anyone defined as a 'worker' under the *WorkCover Queensland Act 1996* may apply for workers' compensation, regardless of who or what caused his or her work-related injury. WorkCover will then assess each application in accordance with the legislation.

The injured worker will need to complete an Application for Compensation Form. The employer will also need to complete the Employer Report Form.

An injured worker may lodge the form and the necessary documents, such as the Workers' Compensation Medical Certificate directly with WorkCover, or they can choose to lodge them through you as their employer. If they lodge the form with you the employer, you will need send all of the necessary documents to WorkCover, including:

- Application for Compensation Form and Employer's Report;
- Worker's compensation medical certificate containing an actual diagnosis from the Doctor;
- Tax File Number Declaration Form (Only needed if the worker needs time off work);
- Other documentation as required.

It is important to remember that you have an obligation under the *WorkCover Queensland Act, 1996* to lodge a claim report within 10 days. Lodging your Employer's Report sooner may help you to minimise a claim's impact on your premium – delays in lodgement can cause an increase in the cost of a claim.

The forms should be lodged as soon as possible after the injury.

WorkCover cannot make a decision without the necessary information. You should avoid possible delays in getting information to WorkCover, and keeping the worker informed about the injury. If necessary WorkCover will contact you for your comments on the injury and any other details relevant to the claim.

You need to fill out the Employer's Report Form within **10 days** of being told or knowing about an injury.

WorkCover needs the employer's input to assess the claim. This is an opportunity for you to comment on the merit of the claim and confirm the details provided by the injured worker. However, if WorkCover has not received information from you within the required time frame, WorkCover will make a decision based on the information available.

If you are concerned about a claim, you must still complete and send the Employer's Report Form to WorkCover. You can note any concerns in the last question on the Employer's Report Form or you can phone WorkCover to discuss any reservations or concerns that you may have.

How Will WorkCover Make A Decision?

To reach a decision on a claim, WorkCover will assess all available facts and may interview the employer, injured worker, doctor and witnesses to the injury. WorkCover has three months in which to make a decision. If WorkCover does not make a decision within this time frame you may have the right of review through Q-COMP the regulator.

Both the injured worker and the employer will be notified of the decision. Both have a right to apply for review of the decision. Reviews are handled independently by Q-COMP. WorkCover will provide you with information about your review rights when they make a decision on a claim.

A worker has six months after first seeing a doctor (dentist for an oral injury) to apply for compensation. WorkCover may waive the six months time limit if the failure to lodge the claim within six months was due to a mistake or another reasonable cause.

Even though a worker has six months to apply for compensation, compensation benefits will normally only be back dated up to 28 days (with the exception of a fatal claim) prior to lodgement. In special circumstances WorkCover may backdate more than 28 days.

If WorkCover does make a decision to allow an application lodged later than six months or backdates compensation benefits further than 28 days, you will be able to apply for a review of this decision.

If the claim involves complex medical issues, the injured worker may be asked to go before a Medical Assessment Tribunal.

This Tribunal is comprised of a panel of doctors, specialists in the particular field of the injury being assessed and will provide an independent medical evaluation.

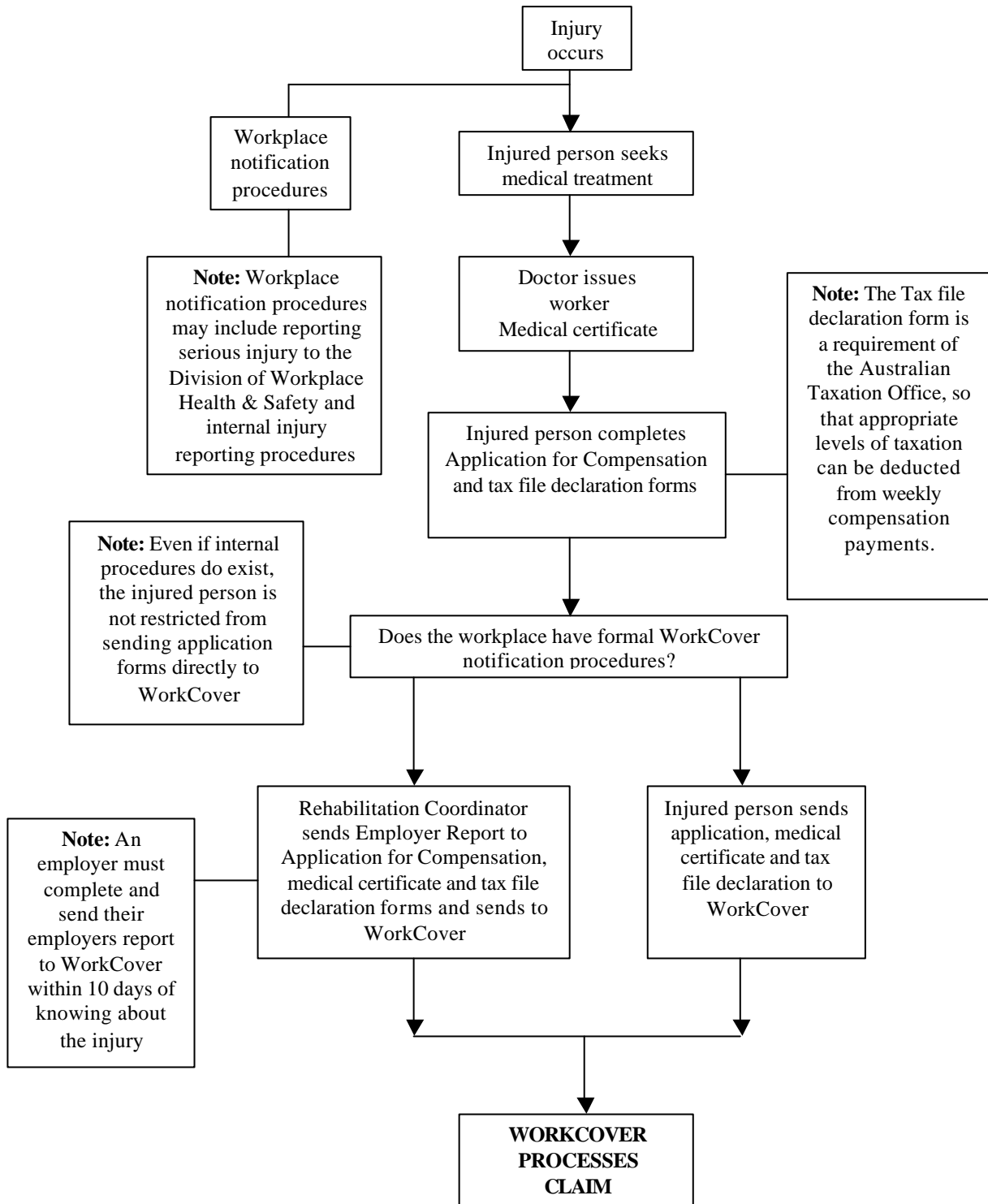
Accuracy is important. Both the employer and injured worker are legally bound to provide WorkCover with true and accurate information in relation to a claim for compensation.

Further Information

Workcover Fact Sheet: A Worker Has Lodged a Claim – What Happens Now?
www.workcoverqld.com.au

APPLYING FOR WORKERS' COMPENSATION

Section 136 states that workers **cannot** relinquish their entitlements to compensation (eg. through Enterprise bargaining or by individual contract with an employer)



ACCESS TO CLAIMS INFORMATION

Can I Access A Worker's Claim File?

WorkCover is committed to protecting the privacy of both injured workers and employers. WorkCover will only release claim information when it helps in managing a claim or if it is required by legislation.

- ❑ Under Freedom of Information legislation you are required to make application to access documents.
- ❑ WorkCover's Information Release Unit will decide as to what is releasable to you as determined by legislation.
- ❑ To apply, you need to complete an Application for Access to Document held by WorkCover, or make a written request provided it contains all of the information required. There is an application fee and copying charges as prescribed under the "Freedom of Information" legislation.

Can I Access A Worker's Claim History?

A worker can have direct access to his or her own workers' compensation claim history through Q-COMP the workers compensation regulator. QCOMP will not give a worker's claims history to a potential employer or third party under any circumstances (not even if the worker has given you a signed release).

If you ask a worker to give you their claim history, it is up to them to obtain it from Q-COMP and give it to you if they choose. However there is no obligation on them to provide the information you request.

Anti Discrimination Issues

The anti discrimination 1300 number is referenced on the Claim History Application Form. Employers who have concerns regarding anti discrimination should contact Ai Group's Industrial Relations Unit for clarification.

Further Information

www.workcoverqld.com.au

www.qcomp.com.au

WORKCOVER PROCESS FOR DETERMINING LIABILITY

Criteria For Assessing A Claim

Once WorkCover receives an application for compensation, WorkCover will consider the individual circumstances of each claim and assess it against legislative criteria, including:

- ❑ Whether the person was a worker at the time of the injury;
- ❑ Whether the person suffered an injury as defined by the *WorkCover Queensland Act, 1996*;
- ❑ Whether their employment was a significant contributing factor to their injury.

WorkCover will endeavour to process an application for compensation quickly as long as the employer and the injured worker have lodged all the necessary forms and have provided true and accurate information on the application.

Some applications are more complicated than others and may take longer to decide. To help WorkCover reach a decision, they may wish to talk to you and the injured worker, witnesses to the injury or the treating doctor. You and the injured worker will be notified in writing as soon as WorkCover have made a decision.

Once the application is accepted you must take all reasonable steps to help with and provide rehabilitation and suitable duties for the injured worker. If you don't, you may be penalised.

As an employer you must make sure that the information you provide to WorkCover is an accurate and true reflection of the issues or case. There are hefty penalties if you are found guilty of fraud or attempted fraud.

These penalties include:

- ❑ Order to pay restitution;
- ❑ Up to 400 penalty units (Penalty Unit is currently \$75).

Injured Worker's Obligations

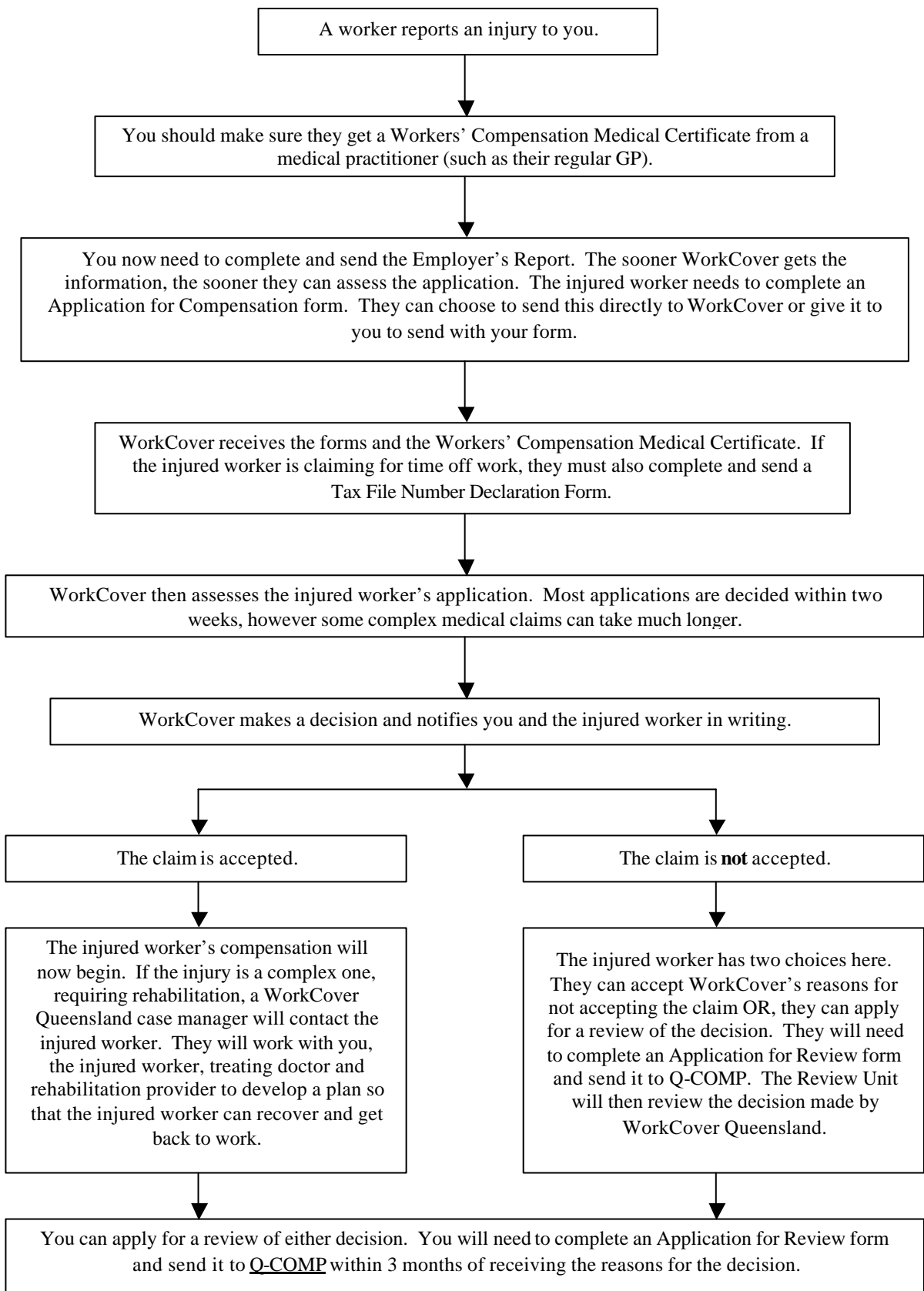
If an injured worker applies for workers' compensation, they have to complete and sign all the necessary forms. The injured worker must make an effort to participate in any treatment; rehabilitation or suitable duties programs offered by you the employer. If they don't participate in rehabilitation, WorkCover may suspend any benefits to the injured person. Rehabilitation minimises the effect of the injury and possibly its impact on your premium.

The injured worker must make sure that the information they provide is accurate and true. There are hefty penalties if you are found guilty of fraud or attempted fraud. They are:

- ❑ Loss of entitlement to statutory workers' compensation benefits;
- ❑ Loss of right to claim common law damages from you;
- ❑ Ordered to pay restitution; and/or
- ❑ Being liable for a fine of up to 400 penalty units and imprisonment of up to 18 months.

WorkCover must accept liability for a claim for compensation prior to any payments being made.

Below is a summary of the process WorkCover follows when determining liability.



COMPENSATION PAID TO WORKERS

The compensation benefits WorkCover may pay include:

- Weekly compensation payments paid fortnightly as income replacement;
- Medical costs (doctor, physiotherapy etc);
- Hospital costs;
- Rehabilitation costs;
- Reasonable travel expenses;
- Lump sum compensation for permanent impairment.

WorkCover will not cover the cost of:

- Damage to clothing, jewellery or prescription glasses;
- Vehicle damage if injured travelling to/from work;
- Unauthorised hospitalisation costs;
- Employer excess.

How Much Are Injured Workers Paid?

The amount of their weekly compensation depends on their employment arrangements. If your worker's employment is governed by an award or workplace agreement, they'll be paid the award rate or 85% of normal weekly earnings (which ever is greater) for the first 26 weeks of the claim.

If your worker is not covered by an award or workplace agreement, they will receive either 85% of their normal weekly earnings or 70% of the Queensland average weekly earnings (whichever is greater) for the first 26 weeks of the claim.

What Is Lump Sum Compensation?

Lump sum compensation is a one-off payment offered to an injured worker if WorkCover find their injury has stabilised and resulted in a permanent impairment. This means a doctor has found the injured worker has lost efficient use of part of their body because of the injury. Permanent Impairment is converted into a percentage Work Related Impairment (WRI) using a formula under the ***WorkCover Queensland Act, 1996***. The amount of lump sum is worked out from the Table of Injuries under the ***WorkCover Queensland Regulation, 1997***. The injured worker has to make some important choices once they receive an offer of a lump sum. Depending on the level of WRI the injured worker may need to choose the lump sum payment or making a common law claim. If the WRI is over 20% they can choose both.

What Are Employers Required To Pay?

If a worker takes time off work due to their work-related injury and WorkCover accepts their application, they are eligible for compensation. You will need to pay up to the first four days of compensation, unless you have taken out the 'excess buyout' which is an option in your policy.

The 'excess buyout' option insures against your liability to pay the excess on your workers' claims:

- On the Declaration of Wages form (for current policyholders); OR
- On the Application for Accident Insurance Policy (for new policyholders).

The cost of insuring against the excess is 8.5% of your premium or \$10 whichever is the greater. In addition, you are required to pay the injured worker for the day they stopped work because of the injury. This amount is paid at the worker's normal pay rate.

An employer should not take the payments for the day of the injury or the excess period out of the employee's sick leave, annual leave or any other entitlements.

If the employer continues to pay the worker beyond the excess period, WorkCover is required by legislation to reimburse the employer for this cost.

Who Deducts Superannuation And Tax?

You may deduct subscriptions (such as Queensland Ambulance) or superannuation from your workers' pay. But WorkCover only deducts tax from compensation payments.

You will have to continue paying compulsory superannuation contributions for your workers who operate under an award or workplace agreement. You should check this with the Australian Industry Group if you are unsure.

Calculation Of Normal Weekly Earnings (NWE)

What amounts may be taken into account?

- Amounts paid to a worker by way of overtime, higher duties, penalties and allowances that are of a regular nature.

What amounts are not included?

- Allowances payable in relation to any travelling, car removal, meal, education, living in the country or away from home, entertainment, clothing, tools and vehicle expenses;
- Contribution by an employer to a scheme for superannuation benefits for a worker, other than contributions made from money payable to a worker;
- Lump sum payments on termination of a worker's services for superannuation, accrued holidays, long service leave or any other purpose;
- Employer excess payments for a work related injury.

Benefits Of Managing The Claims Process

The number and cost of claims you have in your business will ultimately affect the amount of premium you pay. Obviously, the best way to control your premium costs is to prevent workplace injuries and illness. If an injury does happen, the best outcome is to help your injured worker get back to work as quickly and as safely as possible through rehabilitation.

The way to control your claim costs is through rehabilitation and good communication. The length of time it takes a worker to get back to work is a major driver of claim costs. If you can help your worker with alternative duties, the claim cost against your policy and the premium you pay will be reduced. In addition, making sure you lodge your Employer's Report as soon as possible after the injury may help you to minimise a claim's impact on your premium – delays in lodging documents can cause an increase in the cost of the claim.

Further Information

[WorkCover Fact Sheet: How to Calculate Normal Weekly Earnings](http://www.workcoverqld.com.au)
www.workcoverqld.com.au

CLAIM DETERMINATION

How Can You Assist The WorkCover Claims Officer?

The WorkCover Claims Officer will require from an employer the following documentation before making a determination on a claim:

- Application for compensation completed and signed by the injured worker. The injured worker can lodge this form independently of the employer;
- Employer's Report completed and signed by the employer;
- Workers' compensation Medical Certificate. The injured worker can lodge the medical certificate with their application or this may be independent of the employer.

It is important for an employer to fill in on the Employer's Report Form the wages information and to ensure the information provided on the form is factual and is based on what the employer has knowledge of in relation to the injury. WorkCover relies on the wages information to ensure correct payment is made and that no errors in payment occur.

Should an employer have any concerns in relation to a particular claim the Claims Officer within WorkCover would require additional information from the employer, including evidence to support your concerns, such as:

- Supporting documentation such as photographs, human resource and Equal Employment Opportunity documents and safety policy and procedures relating to that particular injury;
- Names of witnesses to the event;
- Any other information that would suggest that the claims officer within WorkCover should closely look at the claim.

In the course of determining a claim WorkCover may require further information gathering by a third party, which may include:

- Psychologist in the case of psychological or psychiatric conditions;
- WorkCover Claims Officer;
- A factual investigator may also attend.

When this is required WorkCover will provide a letter of authorisation to the third party. Employers would also be advised from WorkCover about such visits.

In the case of psychological/psychiatric injuries WorkCover may appoint an independent psychologist to gather necessary information from the worker, employer and any witnesses. This is due to the complex and sensitive nature of these claims. It is important to understand that it is still the WorkCover Claims Officer who makes the decision on the claim

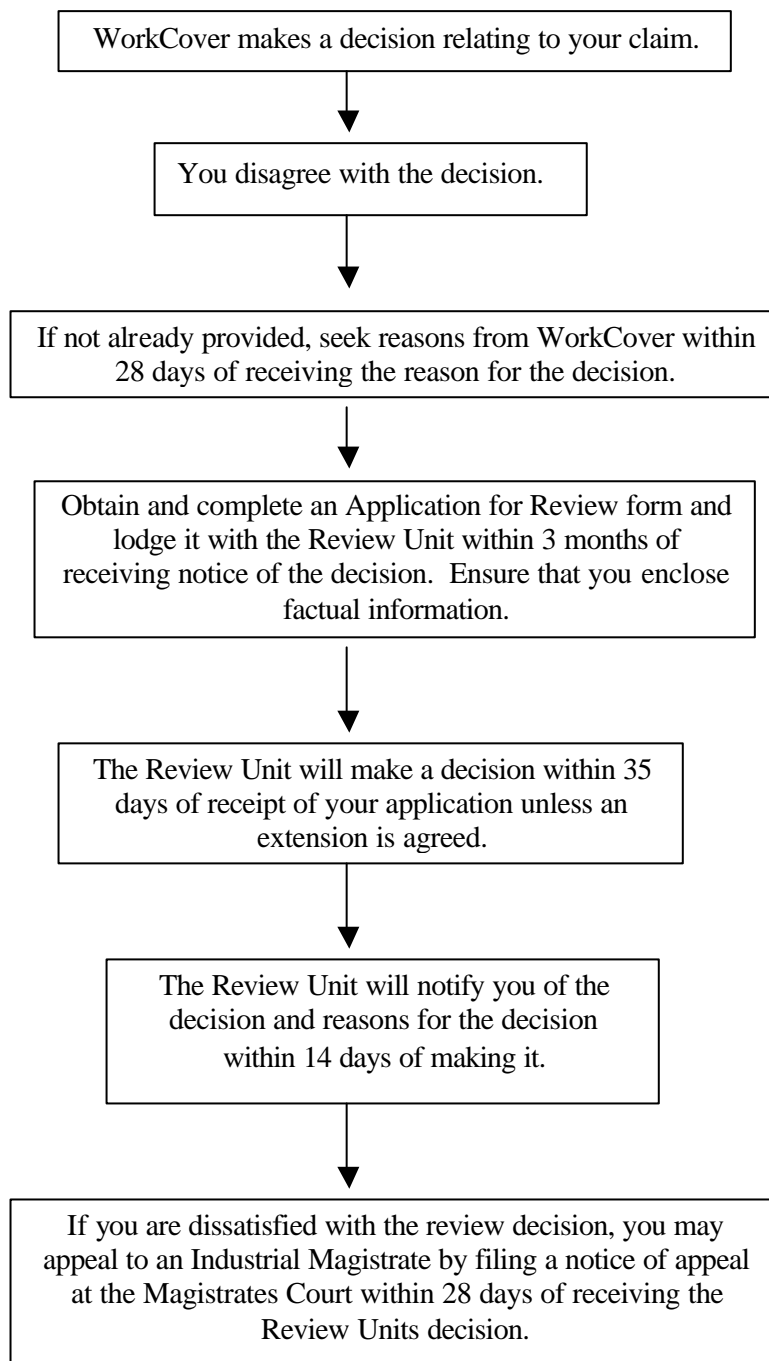
It is important for employers to be co operative with these consultants in order for the claims officer to expedite the claims process. Employers with concerns about the way a consultant undertakes their assessment should contact WorkCover with the details.

Keeping In Contact With The Injured Worker

Employers should not wait until the claim is determined before commencing a return to work program. It is important for the employer to develop a close working relationship with the claims officer as soon as possible to minimise the costs associated with the claim, the impact on the worker and workplace generally.

What Can You Do If You Are Unhappy With WorkCovers' Decision?

Employers can apply to Q-COMP Review Unit if they disagree with certain decisions made by WorkCover, including claim decisions. The application for review must be made within 3 months of receiving WorkCover's reason for the decision and must be accompanied by an Application for Review Statutory Claims Form. Q-COMP will impartially review the decision and make a decision within 35 days unless an extension of time has been granted. The following is a summary of the Review Process.



Further Information

www.workcoverqld.com.au
www.qcomp.com.au

PROVISION OF REHABILITATION

Rehabilitation Information

You, your worker and your workplace morale will all benefit from having a strong commitment to rehabilitation. If you can get an injured worker back on the job, you will benefit from less down time and lost productivity, reduced re-training costs and use of casual staff and, importantly, reduced claims costs.

Injured workers benefit because they have less disruption to their family, social and work life, they build improved physical condition and confidence and feel greater job security.

Rehabilitation in your workplace also means you and your worker keep in regular contact about their recovery.

What Is Rehabilitation?

Rehabilitation can include such things as a suitable duties program, physiotherapy, counselling, on-the-job training for new job skills and special assistance for severely injured workers.

Under the ***WorkCover Queensland Act, 1996*** rehabilitation is defined as meaning:

“The necessary and reasonable services (either by a registered person or approved by WorkCover or a self insurer) or suitable duties program to enable a worker to return to their pre-injury employment and to maximise their capacity to function independently. It includes the provision of necessary and reasonable aids or equipment to the worker.”

The ***WorkCover Queensland Act, 1996*** also outlines the meaning of “workplace rehabilitation” as:

“a system of rehabilitation accredited by WorkCover that is initiated or managed by the employer”

What Are My Obligations?

You must take all reasonable steps to help an injured worker with rehabilitation or suitable duties while they are being paid compensation. If you do not, you may be penalised an amount equal to the compensation paid to the worker during the period you did not comply.

What Are The Injured Worker’s Obligations?

An injured worker receiving compensation must legally participate in appropriate rehabilitation and suitable duties. Worker’s benefits may be suspended if they do not participate.

Do I Need A Rehabilitation Co-ordinator?

If you have 30 or more workers at your workplace for at least 40 days during the year, you must (within 6 months of employing these workers):

- Appoint a trained Rehabilitation Co-ordinator (who is an employee); and
- Have Q-COMP accredited policy and procedures for workplace rehabilitation in place.

The Rehabilitation Co-ordinator position may be full-time or part-time, and they may be a current worker whose job will incorporate the Rehabilitation Co-ordinator’s role. Q-COMP is responsible for regulating Rehabilitation Co-ordinators and can provide information about your obligations.

However if an employer has less than thirty employees and has a high number of claims or injuries, it is important to get the injured worker back on the job. You will benefit from this by having less down time and lost productivity, reduced re-training costs and use of casual staff and reduced claims costs. A rehabilitation coordinator in this particular circumstance would be beneficial.

Remember, if you have less than thirty employees you still have an obligation to provide rehabilitation to an injured worker.

What Is A Rehabilitation Plan?

A rehabilitation plan must be developed for each worker undertaking rehabilitation.

- ❑ The plan must be consistent with the worker's needs;
- ❑ The plan must be developed in consultation with the worker;
- ❑ The plan must at least contain the following matters:
 - Clear and appropriate objectives with ways of achieving the objectives;
 - Details of rehabilitation required to meet the objectives;
 - Projected costs and time frames of rehabilitation;
 - Review mechanism and dates for review;
 - Progress to date.

What Are Suitable Duties?

Employers and often workers do not understand the concept and meaning of "suitable duties".

Suitable duties are designed specifically for an injured person, to allow them an early return to work.

It involves the use of regular tasks that are time limited, specifically controlled and upgraded according to the continuing recovery of the injured worker.

Suitable duties should be carefully planned to facilitate an early recovery without risking further injury or aggravating an existing injury having regard to the following matters:

- ❑ The nature of the worker's incapacity and pre-injury employment;
- ❑ The relevant medical information;
- ❑ The rehabilitation plan for the worker;
- ❑ The provisions of the employer's workplace rehabilitation policy and procedures;
- ❑ The worker's age, education, skills and work experience;
- ❑ If duties are available at another location other than the location in which the worker was injured and whether it is reasonable to expect the injured worker to attend.

Tasks should be meaningful (to ensure dignity and job satisfaction), contribute to production, be in line with any medical restrictions, include variety, match capabilities, not aggravate the illness or injury and be upgraded regularly as the worker's work capacity increases.

A program of return to work on suitable duties should be developed in negotiation with all key stakeholders, ie. treating medical practitioner, injured worker, employer, management and other workers.

The suitable duties agreed to should be:

- ❑ Clearly documented;

- ❑ Signed by the treating medical practitioner and where appropriate by all key stakeholders, ie. injured worker, line management, and the Workplace Rehabilitation Coordinator;
- ❑ Nominate responsibilities for supervising the program; and
- ❑ Distributed to all key stakeholders.

Activities should be specified in terms of the injured worker's physical demands and ergonomic requirements. In summary suitable duties:

- ❑ Are tasks within the residual capabilities of the injured person for example:
 - Aim to safely return an injured worker to work; and
 - Matched to injured workers capacity, skills and experience;
- ❑ Aim to return the injured person to their former job;
- ❑ Should be progressively matched to the person's recovery abilities;
- ❑ Tasks should be meaningful, contribute to production, include variety, matched to capabilities and not aggravate a previous or existing injury;
- ❑ Where there are no suitable duties, you should contact WorkCover and a Rehabilitation Service Provider. If you contact a Rehabilitation Service Provider you will need WorkCovers' approval.

Should an employer wish to appoint an outside provider or health professional, a number of issues will need to be considered, including:

- ❑ Whether or not the provider will be required in all cases;
- ❑ Whether WorkCover approval is required especially where WorkCover is paying for the service;
- ❑ What will be the number and type of providers that will be required;
- ❑ Can the provider meet the employer's rehabilitation objectives, for example return to work goals, cost and timeframe;
- ❑ What will be the level of guidelines regarding communication and documentation required of the provider; and
- ❑ The development of a process for the effective monitoring and evaluation of the provider.

Other considerations include:

- ❑ Looking at the range of services that the provider offers;
- ❑ Specifying up front the employer's needs in relation to meeting the rehabilitation objectives;
- ❑ Develop a plan that sets out specifically what is required of the provider in meeting those objectives;
- ❑ Consider what education, background and experience the provider has in meeting the organisation's needs;
- ❑ Consider any affiliations with professional associations;
- ❑ Consider general business practises, ie. costs, location and possible travel, reports, etc;
- ❑ Consider the status of the person, for example are they a solo practice and if so, do they have access to different and complementary expertise; and
- ❑ Consider the legal and ethical issues that may arise, for example confidentiality of written reports and possible ownership of those reports.

What Is The Role Of The Workcover Rehabilitation Case Manager?

The WorkCover Case Manager is a WorkCover employee whose involvement in the rehabilitation process will be dependent on the circumstances of the case. The role of Case Manager may include:

- ❑ Coordinating injured workers return to work;
- ❑ Approving suitable duties programs;
- ❑ Determining if engaging in health professionals is within the realms of the claim;
- ❑ Monitoring the case management;
- ❑ Providing a point of contact for rehabilitation coordinators as required;
- ❑ Referring cases to the Medical Assessment Tribunal.

What Is A Rehabilitation Service Provider?

It is not expected that a Rehabilitation Service Provider will be required to assist in the rehabilitation process for all injured workers. Their involvement will depend on the severity and nature of the injury and the worker's likely period of absence. Often, rehabilitation can be sufficiently dealt with by the injured worker, treating medical officer, supervisor and Rehabilitation Coordinator.

The *WorkCover Queensland Act 1996* defines medical treatment in Schedule 3 as:

- ❑ Treatment by a doctor, dentist, physiotherapist, occupational therapist, psychologist, chiropractor, osteopath, podiatrist or speech pathologist; or
- ❑ Assessment for industrial deafness by an audiologist; or
- ❑ The provision of diagnostic procedures or skiagrams; or
- ❑ The provision of nursing, medicines, medical or surgical supplies, curative apparatus, crutches or other assistive devices.

Rehabilitation providers assisting in the rehabilitation process should be familiar with the workplace in which they are attending and be sensitive to organisational issues that may exist.

What Is The Role Of An Occupational Therapist?

The goal of an Occupational Therapist is to maximise the potential of the injured worker to allow them to function as independently as possible in all aspects of their life. Occupational Therapists typically carry out job/task analysis, making them an integral member of the rehabilitation process. Other services offered by an occupational therapist may include:

- ❑ Undertaking jobs and tasks analyse to determine appropriate duties for injured workers;
- ❑ Assessment of an injured worker's capacity in relation to the work environment, individual work stations, physical work tasks and work practices;
- ❑ Comprehensively assess the injured worker's potential for return to work by considering physical and psychological demands;
- ❑ Design work conditioning programs, which involve using functional work tasks where the physical demands of the injured worker's job are simulated and upgraded in difficulty and intensity according to their recovery;
- ❑ Design graduated return-to-work programs for injured workers;
- ❑ Recommend job modifications or assistive devices to meet the needs of the physical needs of the worker and their level of physical functioning;

- ❑ Education of workers in correct working postures and appropriate lifting and handling techniques.

Confidentiality of Information

All stakeholders must treat with sensitivity and confidentially any information obtained during the rehabilitation process. If it is necessary to obtain or release information associated with the worker's rehabilitation, the worker's authority to obtain or release the information must be obtained.

The worker's authority is not required for the release of information to WorkCover.

How Do You Evaluate The Service Of A Health Provider?

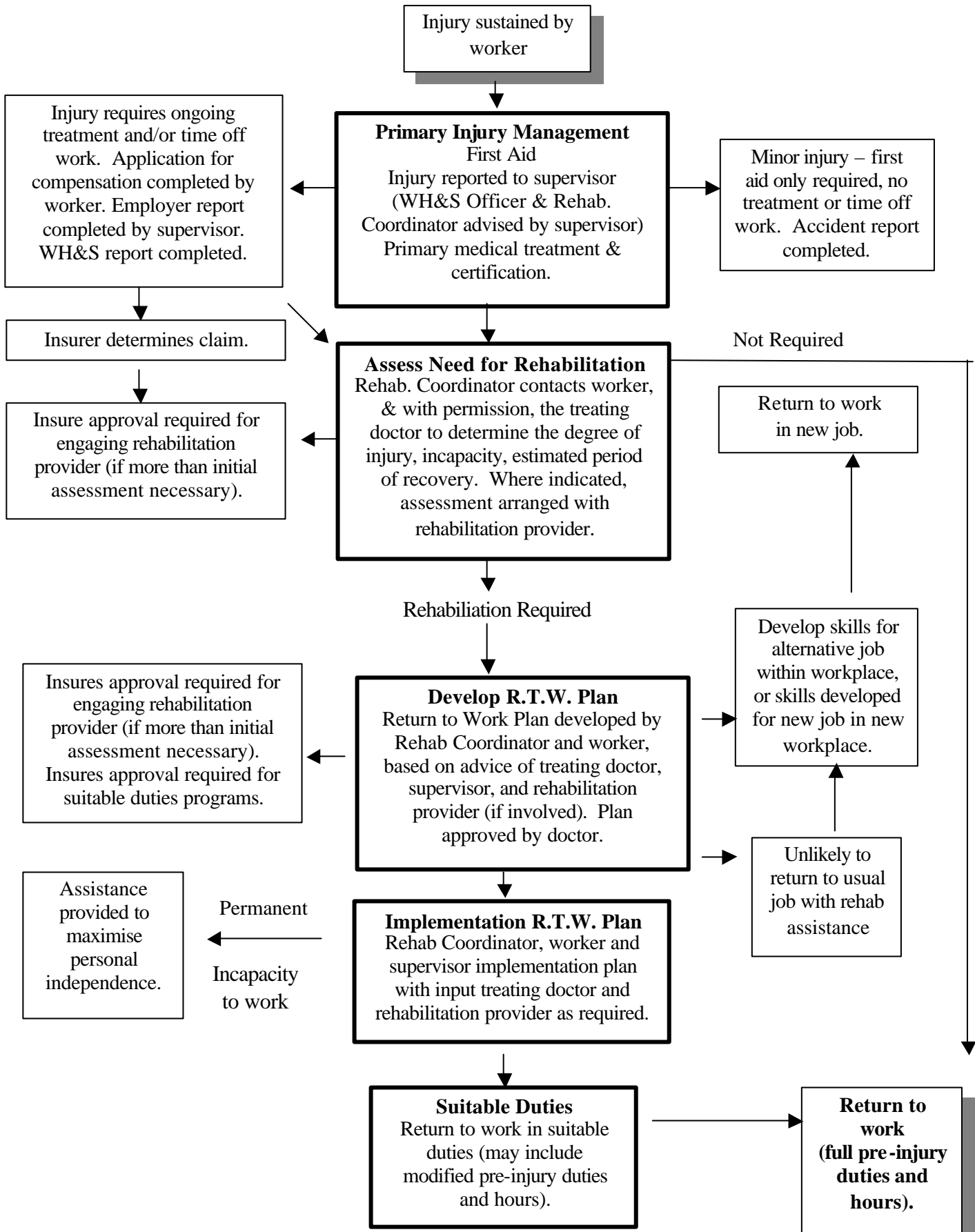
When evaluating their performance, it is useful to consider both the employer's criteria and the needs of the injured worker, for example:

- ❑ Whether specific objectives of the service provided have been met;
- ❑ Number of return to work outcomes as a percentage of cases referred;
- ❑ Whether rehabilitation plans specified by the provider have been accurately reflected, including service provision and cost;
- ❑ Whether communication between the employer and the provider has been effective;
- ❑ Whether management have been able to understand reports and recommendations made;
- ❑ Whether all services were justifiable in terms of provision and cost;
- ❑ Whether the injured worker was satisfied with the provider's service; and
- ❑ The time period between referrals to the provider and the contact with the employer.

Further Information

WorkCover Fact Sheet: Rehabilitation and Suitable Duties
www.workcoverqld.com.au

Workplace Rehabilitation Flowchart (Example)



THE TREATING MEDICAL PRACTITIONER (TMP)

The role of the treating doctor and other rehabilitation providers is extremely important in ensuring a speedy return to work for the injured person.

Ongoing and confidential liaison between the rehabilitation co-ordinator and the TMP will encourage the exchange of useful information.

Regular information exchange should also ensure that the TMP is familiar with the company's activities.

This open communication channel ensures early understanding by the rehabilitation co-ordinator of the medical condition and likely outcomes, and provides the TMP with a single person contact at the workplace to assist with early return to work.

This contact should only be established under the written authority of the injured worker. Many doctors will simply not talk to an employer without this authority.

What Information Do I Need To Supply To The Treating Medical Practitioner (TMP)?

Points that TMP require or need from employers when assessing/treating injured workers would include:

- ❑ Name and contact details of the employer;
- ❑ Name and contact details of the Rehabilitation Co-ordinator (where appropriate);
- ❑ Specific job description of the injured workers job (what they do, how long for each day {task analysis} and how they do it);
- ❑ Knowledge of the workplace processes. It would be the Rehabilitation Coordinator in most cases that would make contact with the Treating Medical Practitioner and would be involved in the early return of the injured worker to the workplace;
- ❑ Any paperwork from the Employer (ie company rehabilitation plans/suitable duties plan/work capacity checklist) to be forwarded to the Treating Medical Practitioner early on (probably best taken along by the injured worker Rehabilitation Coordinator at the time of the initial consultation);
- ❑ Employer or Rehabilitation Coordinator to telephone ahead to advise the staff at the surgery/rooms that an injured worker is coming, rather than just turn up unannounced at the surgery/rooms, expecting assessment/treatment;
- ❑ Employer or Rehabilitation Coordinator to obtain written consent of the injured worker, prior to subsequent discussions with the Treating Medical Practitioner. This is essential as most Treating Medical Practitioners will not discuss the medical details of an injured worker with an employer or their representative without this authority from the injured worker (Privacy Act 2001);
- ❑ If the Employer needs to contact the Treating Medical Practitioner, best to leave a message with the secretary or send a fax (to allow the TMP to telephone back later). Do not attempt telephone the TMP and speak directly to him/her;
- ❑ Rehabilitation plans and suitable duties plans are best discussed openly between the TMP and the injured worker and where appropriate the Rehabilitation Coordinator.

Further Information

www.workcoverqld.com.au