UWA Safety and Health

Workers’ Compensation and Injury Management @ UWA
The terminology used in this document reflects that which is used in the *Workers’ Compensation and Injury Management Act (1981)* and publications provided by WorkCover WA.

Normally, UWA prefers the term “staff member” when referring to employees of UWA. It is acknowledged that it is socially inclusive and more appropriate to say “staff member with an injury”, rather than “Injured Worker”. Similarly, it is inclusive to say “person with a disability” rather than “disabled person”.

It is the person, not their disability or injury that is important. However, to assist understanding and reflect the same terminology used in the Act and Western Australian Government publications “Injured Worker” is used throughout this document, which means the same as “staff member with an injury”.
Welcome to the 2008 edition of Workers’ Compensation and Injury Management @ UWA. This publication provides UWA staff (and affiliates whose staff are covered under the UWA workers’ compensation insurance policy) with basic information on workers’ compensation and injury management. What you need to know, based on questions frequently asked of staff in UWA Safety and Health.

In Western Australia, the Workers’ Compensation and Injury Management Act (1981) provides the legal framework for management of work related injuries and workers’ compensation. Injury management is what happens after an injury has occurred, in returning an injured employee back to work. Historically, the term “rehabilitation” was used. Injury management provisions in the Act are supported by a Workers’ Compensation Code of Practice (Injury Management) 2005, which applies as if the requirements in the Code were regulations.

The Act and the Code of Practice are based upon the principle that whenever it is medically appropriate, an injured worker will remain in, or return to work.

WorkCover WA is the public sector body that oversees the requirements of the Act in Western Australia.

Detailed information can be found in WorkCover’s Workers’ Compensation and Injury Management – A Guide for Workers which can be downloaded from www.workcover.wa.gov.au.

Should you have a query or concern that is not addressed in this publication, please contact UWA Safety and Health on (08) 6488 3938. If you think that something is missing from this publication, please let us know, so that consideration can be given to including the missing information in future editions.

WorkCover WA Information Line
1300 794 744

Free information seminars are held for injured workers and employers. Contact the number above to register.

Disclaimer: This brochure is intended to provide general information only. You should not act solely on the basis of anything contained herein. You should seek appropriate advice about your particular circumstances.
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Section One  The aim of workers’ compensation and injury management

The aim of the system is to support injured workers to return to gainful employment through injury management. A worker, who suffers a defined work-related injury or disease and needs medical treatment and/or cannot work because of the injury, is entitled to claim workers’ compensation.

Injury management is the process whereby the injured worker, along with the employer and treating medical practitioner, come together as a team to assist the injured worker to stay at work, or return to work following a workplace injury.

As an employer, the University is required to have a documented injury management system in place and must provide injured workers with a copy upon request.

Aim of the Injury Management System
The University of Western Australia provides an injury management system to ensure that it is able to respond to workers’ compensation applications quickly and properly, so that injured workers can remain at work, or return to work at the earliest appropriate time.

Injury Management Policy
The University’s approach to injury management is outlined in its Injury Management Policy:

The University of Western Australia

Injury Management Policy

The University of Western Australia is committed to assisting injured workers to return to work as soon as medically appropriate and will adhere to the requirements of the Workers’ Compensation and Injury Management Act 1981 in the event of a work related injury, disease or illness.

Management supports the injury management process and recognises that success relies on the active participation and cooperation of the injured worker. If an injured worker is not able to return to pre-injury duties, wherever possible, modified or alternative duties (with regard to medical restrictions) will be sought within the area of the University that the injured worker is employed. If this is not possible, the University will endeavour to provide alternative duties in another area of the University to facilitate early return to work.

An alternative tenured or ongoing position cannot be automatically granted to an injured worker, to do so would breach the University’s recruitment policies. In the event that an injured worker is unable to return to their substantive position, and if it is appropriate, the University will endeavour to provide a period of assisted job search and work trial placement.

Workplace Information

Employer’s Contact Person: Senior Occupational Therapist
Phone: 6488 2784
Injury Management Consultant
Phone: 6488 7931
Workers’ Compensation Officer
Phone: 6488 3938
Section Two **Claims Procedure**

Work related injury, disease or illness occurs or is noticed

Seek First Aid or medical treatment. If medical treatment is required, ensure medical practitioner supplies a First Medical Certificate

If major injury call 2222* for ambulance and 3938 for immediate reporting to Safety and Health

Contact Supervisor AND Safety and Health Representative (SHR) or School Safety Officer (SSO)

Complete a UWA Confidential Incident / Injury Report Form

Fax First page to UWA Safety and Health 6488 1179. Supervisor to complete second page and forward to Safety and Health, M350

Workers’ Compensation forms forwarded to the Injured Worker, including a form to be completed by Head of School/School Manager or Section Head

* These include:

<table>
<thead>
<tr>
<th>Employee 2B Form</th>
<th>Witness Statement</th>
<th>Employer’s Report Form</th>
<th>Journey Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>To be completed by the injured worker</td>
<td>May be completed by an eyewitness or any person having knowledge of the incident</td>
<td>To be completed by Head of School/Unit, School Manager or Supervisor</td>
<td>To be completed by the injured worker if the injury occurred in a motor vehicle</td>
</tr>
</tbody>
</table>

* Crawley campus. If on a different site check emergency contact number.
Supervisor and/or injured worker forwards completed forms and Workers’ Compensation First Medical Certificate to Safety and Health.

Safety and Health will submit forms to the University’s insurer within three working days.

Insurer notifies employee of the status of their claim within 14 days (whether accepted, pended or disputed).

Every medical visit requires a Workers’ Compensation Medical Certificate.

Medical certificates, approved treatments and prescription invoice/receipts are to be forwarded to Safety and Health via supervisor.

Return to Work Plan developed if unable to return to full pre-injury duties.

Regular monitoring of progress by Safety and Health. Regular review with GP.

Once fully recovered, Final Workers’ Compensation Medical Certificate obtained.
Step 1 - Lodging a Claim

The University requires a Confidential Incident/Injury Report form to be completed for any injury or disease incurred by staff, students, contractors or visitors. Part A must be completed and faxed to UWA Safety and Health within 24 hours (Fax 08 6488 1179).

http://www.safety.uwa.edu.au/forms/incident

Only direct employees of the University (and employees of eligible affiliates) are eligible to apply for workers’ compensation. Students, (including students on scholarships or receiving stipends), non-UWA paid researchers, visitors and contractors are not eligible. Only injuries sustained in the course of undertaking work duties are covered.

When UWA Safety and Health is aware that a worker has suffered a work-related injury, unless it is a minor injury, contact will be made with the injured worker, usually by phone or email. If time off work or medical bills are likely to occur, workers’ compensation claim documents will be sent to the injured worker.

Note: An injured worker has the right not to proceed with a claim if they wish, in which case payment of medical bills will be the responsibility of the injured worker. Time taken off work would then need to be accounted for via the use of leave entitlements, if available.

In order to submit an application for workers’ compensation, the injured worker must return the completed claim forms and provide a Workers’ Compensation First Medical Certificate from their treating doctor to support the application.

In some cases the process commences when a worker seeks the opinion of their treating doctor (medical practitioner) to determine if they have a work-related injury. Early contact with the Workers’ Compensation Officer on (08) 6488 7931 is recommended, so that early intervention and follow-up can occur by UWA Safety and Health.

Please return all completed paperwork to UWA Safety and Health, M350 as soon as practicable. Staff from Safety and Health will assist local management with a Return to Work Plan, if required.

Step 2 – Involvement of the Insurer

When Safety and Health have processed the completed forms, these plus the Workers’ Compensation First Medical Certificate and the Employers’ Report completed by the injured worker’s supervisor will be forwarded to the University’s workers’ compensation insurer.

The above is in accordance with requirements of the Workers’ Compensation and Injury Management Act (WA) 1981 (The Act). Safety and Health staff involved in Workers’ Compensation claims will discuss the workers’ compensation claim with the insurer, to clarify any issues or concerns.

Delays in submitting workers’ compensation paperwork cause medical expenses to accumulate, and affects the ability of the insurance company to make an early decision on the application. Delay also causes inefficient use of the University’s staffing resources chasing paperwork. For the injured worker it can effect how efficiently medical treatment is received. If application forms have not been returned to UWA Safety and Health, accounts will be sent to the injured worker for payment. Delays can compromise liability of the claim.

Early communication and documentation of the injury/incident is important, as causation can be more difficult to prove when delayed reporting occurs.

If unsure of what to do, Supervisors are encouraged to make early contact with Safety and Health by phoning the Senior Occupational Therapist, 6488 2784 especially if the worker is not willing to follow the process outlined above.
The Insurance Claims Manager (employed external to the University) may contact the injured worker and their treating medical practitioner by telephone in the first few days of receiving the claim. This is to establish communication and clarify any issues, or answer questions. Staff in UWA Safety and Health will maintain contact and communicate with the injured worker; their treating doctor; other service providers e.g. Physiotherapists and the injured worker’s supervisor. This is to check on progress, problem solve any difficulties and make arrangements for the worker to remain at work or return to work as soon as medically appropriate. The Insurance Claims Manager is kept informed. This communication can only occur if the relevant sections to allow release of information are signed on the 2B Claim Form, by the injured worker. If at any stage an injured worker or their supervisor is uncertain of any aspect of these procedures, they are required to take responsibility and make contact with either staff in UWA Safety and Health or the Insurance Claims Manager from the insurance company.

The workers’ compensation system can be complex and difficult to understand, particularly if you have never previously been involved with workers’ compensation claims. For staff from overseas or interstate, the Western Australian workers’ compensation system is significantly different from other States, or countries that have national health coverage programs for work-related injury.

Step 3 – Return to Work Plan

According to the Act, a Return to Work Plan (see template in Appendix 1) is required when the workers’ treating Medical Practitioner: -

• Advises the employer in writing that a Return to Work Plan should be established for the worker.
• Signs a medical certificate indicating that the worker has partial capacity to return to work; or
• Signs a medical certificate indicating that the worker has total capacity to return to work but for some reason the worker is not able to return to the position held by the worker immediately before the injury occurred.

If a worker is not certified totally fit to continue with their pre-injury duties, a Return to Work Plan should be developed.

If a Return to Work Plan is required, the Senior Occupational Therapist or Injury Management Consultant from UWA Safety and Health will meet with the injured worker and their supervisor. In the event that the injury is likely to impact on work capacity for more than a few months, referral to an external vocational rehabilitation provider may be required. The need for this type of referral will be discussed with the injured worker and their doctor/ treating medical practitioner if it is required.

Vocational rehabilitation is a specific service that may assist in helping the injured worker stay in, or return to, suitable work. WorkCover WA approves vocational rehabilitation providers and injured workers have the right to choose a provider. Safety and Health can assist you in the process of choosing your preferred vocational rehabilitation provider.

Worker Participation

Following lodgement of Workers’ Compensation paperwork the injured worker will be assigned a UWA case manager from UWA Safety and Health. This will be either the Workers’ Compensation Officer, Injury Management Consultant or Senior Occupational Therapist.

Injured workers are required to keep their supervisor informed of their medical status in relation to the work-related injury, even when certified unfit to work. They must either directly or indirectly via their supervisor keep their case manager informed of their progress. Any absence from the workplace due to the work related injury must be communicated to their supervisor and UWA Safety and Health.

Injured workers are legally obliged to actively participate in their recovery and any return to work activities, according to recommendations provided by their treating Medical Practitioner. Failure to cooperate could result in suspension of entitlements to workers’ compensation payments.

Formal Review at Six Weeks

For soft tissue injuries, a formal review will be undertaken between the injured worker and UWA
Case Manager at six weeks post injury if passive treatment is continuing and has not resulted in progress with return to work.

The review is based on a transition and review phase of Injury Management developed by NSW WorkCover. The approach is founded on research and clinical evidence. The aim is to prevent acute pain transitioning into chronic long-term disability by identifying risk factors.

Formal Review involves identifying psychosocial factors that may be impacting on recovery. (Psychosocial means the interaction between the person and their social environment that influences their behaviour). Social factors include family, friends, co-workers, management, medical/other treatment providers and the workers’ compensation system. Psychological factors include attitudes and beliefs, perception of pain, illness behaviour and psychological distress.

When the risk factors have been identified, follow up intervention will be determined in conjunction with the injured worker and their Doctor. Further medical investigation may be warranted.

For most soft tissue injuries, active participation in an exercise program is warranted post the acute phase of injury. Reliance on passive “hands on” treatment and pain relieving medication for the longer term is not supported by research, and is essentially ineffective in promoting a healthy recovery or return to normal activity.

Other Things That Can Occur in the Process

Case Conferences
It is good practice and common for all involved in the provision of services to the injured worker to attend a case conference with the relevant doctor/ treating medical practitioner, particularly if the claim is likely to last longer than 3-4 weeks. This meeting usually includes the injured worker, Insurance Claims Manager, UWA Safety and Health staff (case manager), the supervisor and any other treating practitioners e.g. physiotherapist. Case conferences are a means of ensuring that everyone involved is clear about treatment goals and the recovery plan.

Independent Medical Review
The University or its Insurer may refer an injured worker (who has submitted an application for workers’ compensation) to a medical practitioner or specialist before a decision has been made on acceptance or denial of a claim, or after the claim has been accepted. The worker is required to attend for medical examination only, not ongoing treatment. If the worker does not attend without reasonable excuse, or refuses to submit for examination, or in any way obstruct the examination, their right to compensation or to execute any proceeding under the Act, and right to weekly payments of compensation may be suspended.
Receiving Letters from the Insurer

There are certain situations, as stipulated by the Act when the Insurer must advise in writing to an injured worker of their rights and entitlements. The standard letters used will contain medico-legal terminology.

A frequent query received by UWA Safety and Health relates to a letter which is sent about six months after the date of injury (only issued if the worker has lost time from work). The letter is a Form 31 “Notice to the worker about termination day for election” asking the injured worker if they wish to elect to seek damages and have the election registered by WorkCover’s Director Dispute Resolution.

Please expect to receive this letter if you have an injury and subsequently lost time from work. You may seek unbiased advice on this from the WorkCover Infoline 1300 794 744.

Concerns or Disputes

Any issues associated with a claim can be referred to your UWA case manager and/or the Senior Occupational Therapist, who will endeavour to resolve these issues, or where necessary, refer the issue to the insurer. In-house concerns or complaints with the University’s workers’ compensation system and procedures can also be referred to the Manager of UWA Safety and Health, or Director of Human Resources.

The University’s workers’ compensation insurer also provides an avenue for issue and dispute resolution. Claimants are welcome to directly contact the Insurance Claims Manager at any time.

Formal avenues of dispute resolution are available through WorkCover (see www.workcover.wa.gov.au) Dispute Resolution Directorate. Contact the WorkCover WA Infoline for further information. A Form 1 can be used to lodge a dispute with the Directorate.

WorkCover WA Free Seminars

WorkCover provides free seminar and an information line for injured workers.

Phone: 1300 794 744
TTY: (08) 9388 5537

Day-to-day Management

The person who has day-to-day responsibility for the injury management system as it pertains to workers’ compensation at The University of Western Australia is the Senior Occupational Therapist in UWA Safety and Health.

Phone: (08) 6488 2784
Fax: (08) 6488 1179

Payments of Workers’ Compensation Wages

The University pays wages associated with a workers’ compensation claim via the normal payroll system and makes these payments when, and if the insurer accepts the claim. Payment of wages occurs for lost time, if your doctor has certified you totally or partially unfit for work and documented this on a Workers’ Compensation Medical Certificate. Any future time off work due to the work related injury must be covered on a Workers’ Compensation Medical Certificate.

Normally, the Insurer will notify the injured worker of the decision on their claim within fourteen (14) days. If the Insurer advises the injured worker that their claim is undecided and is seeking further information, the claim is deemed to be “pended”. If the insurer fails to notify within fourteen (14) days of the claim being lodged with them, the injured worker becomes entitled to weekly payment of compensation if eligible.

For permanent employees covered by an industrial award wages are calculated on the average weekly earnings, including additional entitlements for the thirteen (13) weeks prior to the injury. After thirteen (13) weeks some entitlements are not included. Partial wages may be payable depending on work capacity, or whilst participating in a Return to Work program, even if working part-time, or on restricted duties.

Accounts and Invoices

When a claim has been accepted, forward all accounts and invoices relating to medical treatment (as recommended by the doctor/treating medical practitioner) and other approved statutory allowances (such as medication, travel allowance) to UWA Safety and Health, M350.
Obligation to Maintain Employment
The majority of workers recover from their injuries within a few weeks. For more serious injuries and protracted recovery from injury, if the injured worker has reached partial or total capacity for work within 12 months from the day that they became entitled to weekly payments of compensation, the University is required to maintain the position they held immediately before the day of injury, if it is reasonably practicable to do so. If the job or position is no longer available, the University must provide a similar position for which the person is qualified and capable of performing, that is comparable in status and pay.

If the University wishes to terminate a worker within the 12 months mentioned above, written notification must be given to the injured worker 28 days before the intention to terminate employment, with written notification to WorkCover WA at the same time.

The above is in accordance with the Workers’ Compensation and Injury Management Act (WA) 1981. Other Employee Relations legislation including unfair dismissal and anti-discrimination legislation must be adhered to. Termination is a last resort, when all rehabilitation efforts have failed, including job search assistance within and external to the University. For longer term disability associated with injury, injured workers should check and be aware of eligibility criteria under the University’s superannuation scheme for incapacity payments.

Discontinuation of Employment at the University
When an injured worker with an accepted workers’ compensation discontinues their employment at the University, for example decides to resign, or finishes their contract, if they are certified totally or partially unfit for work, the University may need to continue paying workers’ compensation weekly payments (wages) or part payments.

If the injured worker takes up employment with another employer, the Insurance company will review eligibility for payment or partial payment of wages, based on ensuring that the injured worker is able to reach pre-injury (at the time of the injury) earning capacity.

Note that approval must be obtained in advance from the University before commencing employment with another employer.

Reasonable medical expenses will be covered by the insurer until medical attention or service provision is
no longer required and/or a Final Medical Certificate is issued, or there is finalization of the claim through settlement, or the prescribed statutory limit is reached.

**Obtaining other Employment**
If an injured worker with an accepted claim at the University obtains work elsewhere they must inform the University and its Insurer within seven days of commencing with a new employer.

**Casual Work/Other Employment**
If an injured worker has other employment this should be declared at the outset when putting in an application for workers' compensation. When a worker is certified by their doctor as unfit or fit for partial duties or advised to work with restrictions, this applies to all employment. Similarly, the injured worker needs to be careful with non-work related activities and not aggravate their injury. If your Doctor provides a restriction on activity, such as a lifting limit of 5kg, this means you must adhere to this in your everyday private activities.

Compensation to the injured worker may be payable, to cover not being able to undertake normal duties with a second or other employers.

It is dishonest and potentially fraudulent to work for another employer (or be self employed) and not declare this when in receipt of wages through workers’ compensation. Work undertaken elsewhere could impact on recovery from injury. It would mean that there is another source of income not being declared. The aim of workers’ compensation is to get the injured worker back to pre-injury (at the time of injury) earning capacity. Not managing work activity at another place of employment potentially affects recovery from the injury and prolongs the claim.

**Current Medical Certification**
At all times when your claim is active you must be covered by a medical certificate. Read each certificate carefully to see what dates are included. Ask your GP at the end of each appointment when should you return for your next appointment. Make your next appointment at the end of each visit.

It is important to have another Doctor whom you could see if your usual Doctor is not available. Ask the Doctor that you usually see who they would like you to see if they are not available. Time lost from work due to a workers’ compensation injury can only be covered if documented on a medical certificate. Certificates cannot be backdated. If you find that you come back to work and then are unable to work due to your injury, you must return to your Doctor and obtain certification for the day/time off work.

If you have surgery, find out whether the Specialist/Surgeon or your usual Doctor will provide the Workers’ Compensation medical certification. If you are under the care of a Specialist/Surgeon it is best to keep visiting your usual Doctor regularly and keeping them up to date with your progress.

**Taking Leave**
If you wish to take annual leave/long service leave whilst participating in a Return to Work Plan, discuss this with your UWA Case Manager, wherever possible it is best to wait until you have returned to full duties and normal hours of work and not disrupt progress made. This may occur by being away from work and becoming deconditioned. Wages or partial wages need to be paid through workers’ compensation. The University has the right to refuse leave applications during this time but tends to negotiate to meet the needs of the local area and the injured worker wishing to take leave.
Section Three Roles and Responsibilities

Injured Worker
Responsibilities:
• To not put self at risk of injury or harm, including aggravation of injury.
• Promptly report any injuries sustained through your work.
• Adhere to medical advice and instructions on Return to Work Plan.
• Keep supervisor informed and communicate any change of medical status – report any significant increase in symptoms.
• Provide a copy of medical certificates to supervisor.
• Ensure at all times whilst the claim is active that time at work is covered by a medical certificate, keep in regular contact with your Doctor.
• Actively participate in injury management process and follow the Return to Work Plan if you have one.
• Take responsibility for injury recovery, attend appointments and exercise programs.

Supervisor
Responsibilities:
• Aim to ensure that the injured worker is not put at risk of further injury or harm by enabling them to follow the advice on medical certificates.
• Support the injured worker and other staff who may be affected.
• Keep in contact with the injured worker when they are off work. (Check what is the best form and time for communication).
• Be a role model in the attitudes you display.
• Provide modified or alternative work, as required. Be active in the development of the Return to Work plan and monitoring of progress.
• Maintain confidentiality at all times.
• Meet regularly (at least once per fortnight) with injured worker and discuss progress with injury progression and impact on work-life.
• Investigate the incident which caused injury and implement risk controls to try and prevent future injury.

In-line Management – School Manager/Head of School/Head of Unit
Responsibilities
• Be aware of staff with work-related injuries and active workers’ compensation claims. Take an interest in the welfare of these staff.
• Check that proper investigation of the incident has occurred and risk control measures are being implemented as far as practicable.
• Support supervisors and provide assistance as required.
• Assist with resolution of issues that may arise e.g. performance issues, inability to provide long-term accommodations to the injured worker.

Safety and Health Representative and/or School Safety Officer
• Assist in the investigation of the incident.
• Provide relevant safety advice to management related to the incident.
• Maintain confidentiality at all times in relation to the injured worker. Respect privacy.

Treating Medical Practitioner
Role – As the primary health provider:
• Regularly review the injured worker and manage medical and allied health treatment provision.
• Provide instruction on work-related duties that may or may not be undertaken.
• Complete Workers’ Compensation medical certificates appropriately (only treatment documented on the certificate can be covered).
• Educate and communicate with the injured worker regarding what they should or should not do in relation to their injury.
• Review, amend and approve Return to Work Plans provided by UWA Safety and Health.
Section Three  **Roles and Responsibilities continued**

**Medical Specialists including Surgeons**
- Provide Specialist services, upon referral from Doctor (GP).

**Service Providers e.g. physiotherapist**
- Provide treatment under the direction of the Doctor (GP).
- For treatment provided for more than three weeks, provide a treatment plan and outline of costs and likely benefits to be achieved to the Insurer.

**UWA Safety and Health Workers’ Compensation Officer**
- Administration of claims.
- Enquiries related to workers’ compensation processing.
- Financial processing of wages in liaison with case managers, HR Services and local management.

**Senior Occupational Therapist (UWA Staff)**
- Co-ordinates the Injury Management System.
- Case manage and monitor progress of injured workers.
- Development of Return to Work Plans in conjunction with the injured worker and their supervisor and treating medical practitioner.
- Liaise with all stakeholders.
Injury Management Consultant (UWA Staff)

- Case manage and monitor progress of staff with injuries affecting their work – or who have active workers’ compensation claims.
- Development of Return to Work Plan in conjunction with the injured worker and their supervisor and treating medical practitioner.
- Liaise with all stakeholders.

External Rehabilitation Provider

- Case manages specific claims when more frequent monitoring is required.
- Assesses suitability and viability of injured workers’ ability to return to pre-injury duties.
- Development of Return to Work Plan in conjunction with the injured worker and their supervisor and treating medical practitioner.
- Makes recommendations to the treating medical practitioner regarding suitability of duties at work or further treatment for approval.

Manager Safety and Health

Role

- Keep informed of Workers’ Compensation claims and progress of longer duration claims.
- Assist with resolution of issues as appropriate.

Director Human Resources and/or Senior Deputy Vice Chancellor

Role

- Assist with resolution of staffing issues that may arise e.g. performance issues; inability to provide long-term accommodations to an injured worker who has an ongoing disability.

Insurance Company Claims Manager

Role

- Monitor claim costs and recovery of Injured worker.
- Administration of the claim, as per WorkCover WA’s requirements.

Medical Specialist appointed by Insurance Company

Role

- Independent Medical Review – examine medical reports and investigations, treatment to date and physical examination of injured worker.
- Report to the Insurance Company with opinion and recommendations.

Senior Employee Relations Manager and/or Manager of Equity and Diversity

Role

- Assist with resolution of staffing issues that may arise e.g. equity issues, performance issues; inability to provide long-term accommodations to an injured worker.
Section Four **Frequently Asked Questions**

**Should I put in a claim?**

If you have suffered a work-related injury, you have a right to put in a claim. You also have a choice not to proceed with an application or withdraw at any point. When you have indicated a desire to put in an application, and then decide not to proceed, the University will request that you put this decision in writing.

The University has a legal obligation to inform injured workers of their rights to put in a claim. The University does not make decisions on acceptance or denial of claims. Supervisors and managers must not give advice on whether or not the claim will or will not be accepted. All relevant documentation will be provided to the workers' compensation insurer to make a determination on the claim.

**Why are so many different people questioning me?**

At the outset of an injury, it can be difficult to determine the long-term prognosis for recovery. There may be significant legal liability attached to a claim and facts need to be obtained as soon as possible after the injury to obtain a baseline. It is not unusual to be questioned about activities prior to the incident; previous symptoms or similar injury or symptoms; past use of treatment providers; use of medication or relevant previous medical history. Try not to take this part of the process too personally, think of it as similar to putting in an insurance claim for any other purpose … Insurance companies need to know all the details.

**How long do I have after an injury to put in a claim?**

According to the Act, an injured worker can put in a claim up to twelve (12) months from the date of injury or occurrence of a disease. (There are a few exceptions related to industrial diseases). Delay in putting in an application will most likely generate more probing and investigation because the longer the delay the harder it is to establish a causal link between the injury and a particular incident - or any medical complications following the injury. You will probably be asked what else could have caused or aggravated the injury/disease in the interim, and the Insurance Company may need to obtain medical evidence regarding causation from your Doctor.

**I have not had a specific incident/injury but gradual onset of symptoms – can I claim?**

For mental illness and diseases including musculoskeletal disorders, the onset of illness/disease can be gradual. In order to make a claim, there must be a direct and significant causal link to work, plus written support from a Doctor or treating medical practitioner on a First Medical Certificate. Work must be the main contributing factor.

**Why is there so much paper work and “hassle”?**

Workers' compensation processes and paper work requirements can be daunting. Be aware that it is an insurance scheme, with many reporting requirements that may have potential legal liability attached. Failure to gather pertinent information at the outset of a claim can have costly consequences later on. Each document that you complete is a legal document and can be subject to presentation in a court of law.

**When will I find out if my application for workers’ compensation has been accepted?**

The University’s workers’ compensation insurer has fourteen (14) calendar days after receipt of a claim to make a decision on whether your application to make a workers’ compensation claim is accepted, pended or denied. In some cases they may pend the claim awaiting further information. In any case they must write to you within the fourteen (14) days to give advice on this matter.

**What is WorkCover WA?**

WorkCover is the State Government Public Sector Agency that oversees the Workers’ Compensation system in Western Australia. WorkCover WA oversees the workings of the Workers’ Compensation and Injury Management Act (WA) 1981, approves and audits Vocational Rehabilitation Providers and Workers’ Compensation Insurance Companies; provides guidance materials; sets rates and schedules of fees for treatment providers; and runs the Dispute Resolution Directorate. For further information see www.workcover.wa.gov.au
What is WorkSafe WA?

WorkSafe is the State Government Public Sector Agency that oversees Occupational Safety and Health legislation in Western Australia. (In some other States of Australia WorkCover branches oversee both workers’ compensation and Occupational Health and Safety).

WorkSafe must be notified of certain work related injuries and diseases and may visit the workplace to undertake an investigation following such notification. Notifiable injuries include amputations of limbs and also any injury requiring more than ten (10) days off work immediately after the injury. UWA Safety and Health will inform you if WorkSafe intend to visit due to your work injury. The Inspector from WorkSafe may want to interview the injured worker and their supervisor.

What expenses are covered under Workers’ Compensation?

- **Any reasonable medical expenses** related to the injury for which you are claiming workers’ compensation as directed by your treating medical practitioner. As a general rule, “reasonable” expenses stipulated and written on the WorkCover First Medical Certificate and Progress Certificates by your Doctor will be covered. E.g. physiotherapy, occupational therapy, chiropractic, medication, aids and equipment. For alternative and unscheduled therapies, approval should be sought from the Insurance provider prior to commencing treatment.

- **Travel to and from medical appointments** related to your injury (from home or from work) is claimable at a rate stipulated by WorkCover WA. Please keep a log of the date, reason for travel and number of kilometers and pass this information to UWA Safety and Health. There are forms that can be provided for this purpose by UWA Safety and Health, or photocopy Appendix 3.

- **Vocational Rehabilitation** – should you require referral to an external rehabilitation provider to oversee your return to work; return to different employment or another employer.

- **Wages** – for loss of earning capacity, if you require time off work or are partially unfit to undertake full duties.

Do I need to pay my medical bills, pharmacy bills and other accounts up front?

This is your choice. Generally treatment providers will allow you to not pay accounts up front. Once a claim is accepted there is no need to pay accounts up front, provided the treatment is under the direction of your treating medical practitioner. Send all accounts to UWA Safety and Health M350. If you have paid the account, please keep a copy of the receipt for your records.

Be aware that if your claim is not accepted, payment of all accounts is your responsibility.

Some investigations such as MRI’s and treatment programs, such as exercise programs, pain management programs, or gym memberships require approval from the Insurance Company before they can proceed.

Any operation, surgery or longer-term program of treatment must be quoted and approval must be obtained from the Insurance Company before proceeding.

WorkCover WA sets limits on how much can be charged by treatment providers, including hospital rates and any gap charged from this rate is the responsibility of the injured worker. For further information see www.workcover.wa.gov.au

There are limits on the amounts for all of the above, set by WorkCover WA; these are updated each year on 1st July. See www.workcover.wa.gov.au or contact the WorkCover WA Infoline.

WorkCover WA also has a schedule of fees outlining how much treatment providers can charge for their services. Any gap in the fee between what the service provider charges and the schedule is the responsibility of the injured worker. For further information see www.workcover.wa.gov.au.

In exceptional circumstances there are other entitlements under the Act, such as an extension to the medical entitlement for serious injuries (up to $250,000). Likewise specialised retraining allowance if the training is essential for a return to work, provided that eligibility criteria are met. For further information search under ‘Publications’ on the WorkCover WA website.
My treatment provider wants a claim number. Where do I get this?
Your claim number will be on all correspondence sent to you by the University’s workers’ compensation insurer. A claim number cannot be issued until the Insurer has been notified of your injury. If needing assistance, contact UWA Safety and Health on (08) 6488 3938 or the Insurance Company.

I feel ready to return back to work, can I go back to work if I am careful?
You can only return when your Doctor has certified you fit to return; fit to return with restrictions; modified duties or put in place other measures to protect you from aggravation to your injury. Under no circumstance should you return without clearance from your treating Doctor. If you turn up to work without clearance, your supervisor will be required to send you back to your Doctor (or another Doctor if the initial Doctor is not available) for clearance to return to work.

Unfortunately some Doctors do not make this requirement clear to their patients. Some injured workers will take advice from allied health providers such as physiotherapists on when to return to work. Whilst it is good to get different opinions, it is only the treating Doctor who can complete the WorkCover Medical Certificates.

Managing staff with a work-related injury is very different to a non-work related injury, e.g. falling over at home on the weekend. With non work-related injury, the worker has more autonomy to make decisions on whether to attend work or not, based on how they are feeling. Whilst the University still wants to ensure that its staff are safe at work after both types of injury, a medical certificate is always required before returning to work following a work-related injury.
Section Four Frequently Asked Questions continued

What should I do with my accounts?
Accounts for medical treatment and services approved by your Doctor should be sent direct to UWA Safety and Health, M350 via internal mail. If you pay the account up front, keep a copy of the receipt. The University’s Workers’ Compensation Insurer will forward you a cheque to re-imburse the costs, provided you have an accepted claim.

Will my area be reimbursed for my lost time and wages?
If you have an accepted claim for workers’ compensation the University will arrange payment of your wages for lost time, or partial duty via the normal payroll system. The only notification that you will receive is a letter regarding this from the University’s workers’ compensation insurer. Wages are based on the average of thirteen weeks (13) wages prior to the date of injury, including additional entitlements for permanent workers on an industrial award.

Reimbursement to your area for lost wages must be negotiated between your manager and the Senior Occupational Therapist prospectively, not retrospectively. Generally reimbursement will only occur if the area back fills or provides assistance (additional staffing resources) to cover what you are unable to do due to the injury; or where research grants/outcomes are significantly affected. Reimbursement is then based on the cost of the backfill or assistance required and paid by journal transfer into a nominated account.

What expenses are not covered?
It is not possible to provide an exhaustive list. Assistance with housework and taxi fares are common requests, these are not covered. In exceptional circumstances the University’s workers’ compensation insurer may make a decision to provide limited assistance. However these items are not covered under the Act and there should be no expectation of being covered. Alternative treatment or surgery for which there is insufficient clinical evidence of being beneficial in obtaining sustainable recovery may be refused e.g. aromatherapy, massage, or health retreats.

How often should I see my doctor?
After your first consultation, where a First Medical Certificate should be provided, you must return to your Doctor within fourteen (14) days. This is a requirement under the Act. Following this, every two weeks is ideal. If recovery becomes protracted you should visit your Doctor every month (or at intervals recommended by your Doctor) for an updated medical certificate, until a Final Medical certificate is issued.

Try and book the next appointment at the end of each appointment as Doctor’s get very busy and it is sometimes difficult to make appointments at short notice.

What should I do with my progress certificates?
Give a copy to your supervisor – and discuss the contents. Keep a copy for yourself and send the original to UWA Safety and Health, M350. Read each certificate carefully and make sure you understand what is written on it. The date of your next appointment should be clearly stipulated, if not, be aware of when your next appointment is scheduled (a maximum of four (4) weeks is recommended).
What happens with information related to my claim?

There are strict requirements concerning confidentiality of workers’ compensation documentation. Information is kept in a file separate to your Human Resources personal file. UWA Human Resources staff (other than those mentioned in this document) do not have access or knowledge of claims.

All active workers’ compensation files are kept secure in UWA Safety and Health. Inactive claims are stored in Archives and Records. Only UWA Safety and Health staff involved in workers’ compensation claim processing, the Insurance and Risk Management Officer; Manager Safety and Health; Director of Human Resources; Executive Director of Finance and Resources; Senior Deputy Vice Chancellor; Vice Chancellor; Legal Services (if requested to advise); Archives and Records staff have access to workers’ compensation files. Under no circumstances will medical reports be released to a third party without your consent. This includes any of your managers or future managers/supervisors.

The UWA Medical Centre and its Doctors work totally independently to the management of workers’ compensation claims in HR at the University and provide the same level of service as other medical practices. Therefore Doctors at UWA Medical Centre do not have knowledge of claimants, unless it involves one of their patients.

You will be given copies of medical reports if the Insurer requests that you see a Specialist. It is your choice whether to disclose the contents to your supervisor. If you feel comfortable in showing the report to your supervisor, it can assist with understanding your injury and impact on work and or prognosis.

If you need a Return to Work Plan, a copy will be given to you and your supervisor. This assists with managing your injury, and ensures that everyone involved is clear on what duties can or should not be performed.

Who do I tell if my Doctor advises me to have restrictions with my work?

Your supervisor must be kept fully informed of any restrictions. Ensure that they receive a copy of your Medical Certificates. If you have any restrictions a Return Work Plan should be developed.

Work colleagues impacted by your restrictions need to be informed – and should provide assistance accordingly. It is important to meet with your supervisor and determine what and how to communicate with other staff about your situation, in a manner that preserves your dignity and does not cause undue anguish. If need be, explain to others how you wish to be treated. Sometimes it helps if you cannot do all of your duties to find other things that you could do that you do not normally do to assist the team.

Most injured workers find ways of assisting more in tasks that they can perform. Generally restrictions and recovery from injury is relatively short term.
Keep in mind that from the University’s perspective and probably from your own, it is better be at work and contributing than being at home on full wages – when you might be able to do some of your work or alternative duties. At times you might feel very frustrated at not being able to do everything that you normally can do, or the length of time that it is taking to recover or uncertainty on how long it is going to take to recover. It is best to talk to someone about these feelings. Stress and frustration can make the situation a lot worse, and often injured workers need to vent.

Please refer to UWA Employee Assistance Providers (EAP) listed in FAQ.

The Insurer has requested that I attend another Doctor – can they do this?

Yes. Under the Act when the Insurer needs clarification on the injury, causation, and treatment regime or to find out if you are getting the best treatment, they may direct you to see a Specialist. This is normal protocol and occurs in about 30% of claims. It is important that you confirm the appointment, reschedule as early as possible if you are unable to attend, and cooperate with the request. Take along the results of any x-rays or results of any other investigations that you have in your possession.

Will having a claim affect future job prospects?

Most employers ask questions regarding current or previous workers’ compensation claims in the application or recruitment process.

Under Equal Employment Opportunity employers must not discriminate against anyone with a previous claim. Generally employers are only interested in claims that are active, or where the worker has residual restrictions that could impact on the ability to perform the inherent requirements of the position. It is important to be confident and honest about being able to perform the job and if in doubt, ask. You must not under any circumstance falsely misrepresent yourself. Your track record, job performance and referee reports would ideally over ride any concerns.

Can the University divulge information about my claim to a future employer?

No, not without your written consent.

If I choose to seek legal representation, can anyone at the University talk to my lawyer?

No, not without going through our workers’ compensation insurer, and not without your written consent.

Can anyone at the University talk to my partner, Union or anyone else about my claim?

No, not without your written consent and preferably this would be done through a face-to-face meeting with the other party and you present.

Can the University divulge information about my claim to Centrelink?

Yes, if you have made a claim for payment from Centrelink it is normal protocol for Centrelink to contact the University to determine if there is any history of workers’ compensation claim.
Where can I get technical Workers’ Compensation information?

Call the WorkCover free information line and attend one of their free information seminars if you are considering seeking legal advice. If you are a member of a Union, consider seeking their guidance. Try not to be only influenced by what you hear from friends and acquaintances. The workers’ compensation system in Western Australia has undergone frequent changes and the circumstances of each claim are very different. Legal advice can be costly and perhaps not necessary.

A surgeon has recommended surgery and booked the date – what should I do?

Unless it is a crisis situation after a severe accident, you have a right to a second opinion. Ensure that you speak to your treating medical practitioner about any concerns. All surgery must have prior approval from the University’s workers’ compensation insurer who may request further information from the surgeon, or seek a second opinion.

Surgeons are aware that they must seek prior approval from the insurer, as are hospitals. Patients are generally required to sign documents upon admission stipulating that they will cover costs if the third party (workers’ compensation insurer) is not liable to pay. Unfortunately some Surgeons do not follow the requirement of obtaining approval from the Insurer before surgery is arranged.

It is always good protocol to keep your Doctor (GP) informed and maintain regular contact even when seeing a Specialist. It is usually your Doctor (GP) who will oversee your return to work and provide progress certificates. Appointments with Specialists and Surgeons tend to be less regular post surgery – but it depends on the Specialist/Surgeon.

I have recovered, do I have to finalise my claim?

Sometimes workers want to keep their claim open as long as possible, in case something goes wrong in the future. The workers’ compensation system is not intended to be a long-term safety net, it is aimed at recovery and getting the injured worker back to pre-injury duties and working capacity as soon as possible.

When a claim is left “open”, there are costs attached which the University continues to be liable for. Finalizing your claim, if you have recovered, by way of a Final Medical Certificate from your Doctor helps to reduce the overall costs of workers’ compensation for the University. Local areas pay an on-cost for each employee to cover the University’s workers’ compensation premium. Should claim costs increase, this is borne by an increase in the on-cost, essentially meaning there is less funds for other things at the University.

In the event that the worker has a further aggravation or another incident causing the injury to the same area, it is simply a matter of putting in another application or Recurrence of Injury Form. Provided that there has not been a settlement on the original claim and no pay out, normal eligibility criteria for workers’ compensation applies.

Isn’t Workers’ Compensation a long term “Safety Net”?

Some claimants consider workers’ compensation to be a form of “safety net” and fear closing their claim in case something happens in the future. This causes significant cost “blow out” with claim expenses. Genuine and reasonable treatment will not be denied, but when excessive treatment and over-servicing occurs, the University and its Insurer will investigate suspected abuse of the system. The aim is to have a fair system for all.
Across all industries 6% of claims cost 96% of the total cost within the workers’ compensation system. This is not to negate genuine claims when severe injury does occur resulting in higher costs. Unfortunately it is other “abusers” of the system that create negative stigma for genuine claimants – injured workers who should lodge applications but decide not to, to avoid stigma.

A good question to ask (admittedly from the University’s point of view) is - How would I be if I had done this injury at home or playing sport...how much treatment would I seek and be personally prepared to pay for? Likewise, being honest about any previous condition - not expecting the workers’ compensation system to pick up the tab for treatment of pre-existing conditions. Taking control and responsibility for overall health is important. Having a positive attitude is extremely important in the recovery from any injury.

What is the cost of workers’ compensation at UWA?

This fluctuates according to performance each year and number of claims. Obviously, if we can reduce injuries this is better for everyone and there will be more funds available for other services and facilities at the University. At any time, you can request from the Insurer the total amount expended on your claim.

I feel frustrated, angry and depressed who can I talk to?

Staff can arrange to talk to an independent person confidentially by contacting the University’s Employee Assistance Providers (EAP) who provide free psychological counselling for staff and their immediate family members. See www.safety.uwa.edu.au/policies/eap

Provider details – to contact for an appointment:

University Counselling
Service Student Services
2nd Floor, South Wing Guild Building
Phone: 6488 2423
Website: www.counselling.uwa.edu.au

OSA Group
Level 16
251 Adelaide Terrace
Perth WA 6000
Phone: 1300 361 008
Website: www.osagroup.com.au

How many workers’ compensation claims does UWA have each year?

From approximately two hundred and fifty (250) incident and injury reports (from staff, students, contractors and visitors), each year there is between seventy to eighty (70 to 80) accepted workers’ compensation claims. Of these, there are generally about ten lost-time injuries, requiring more than ten days of work time lost. Very few claims require a person to be off work for more than a few weeks. Rarely do injured workers need to find alternative positions at the University or external to the University due to their injury.
Section Five  **Sharing experiences with other staff**

Adjusting to having an injury and resultant incapacity can be difficult to come to terms with, even when relatively short term or for a few months. Uncertainty about the medical condition; prognosis; job security and frustration with not being able to do everything that you usually can do – at work, or in your personal life is normal.

Other staff at the University who have been in a similar position may be available and able to assist. Some of these staff have indicated a willingness to be contacted to provide support.

If you want to speak or meet with another staff member at UWA, who has experienced a similar situation or medical condition similar to your own, please do not hesitate to ask. We will then approach a relevant staff member and ask if they agree to being contacted, gain their permission to release their contact details to you. Your contact or injury details will not be released unless you give approval for this to occur. It is then up to you to contact the person when you feel ready to do so.
Appendix 1  **Return to Work Plan Template**

**Contact Details**

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<thead>
<tr>
<th>Worker</th>
<th>Employer</th>
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<tbody>
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<td>Telephone</td>
<td>Work</td>
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<td>Home</td>
<td>Telephone</td>
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<td>Fax</td>
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<td>Case Manager</td>
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<td>Telephone</td>
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<th>Rehabilitation Provider</th>
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<td>Telephone</td>
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<td>Fax</td>
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**Program Details**

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**Actions to be completed to enable [Injured Worker] to return to work**

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<thead>
<tr>
<th>Item</th>
<th>Action</th>
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**Return to Work Goal**

**Date of Medical Review**

**Diagnosis**

**Work Restrictions on Current Medical Certificate**

**Comments**

**Start Date**

**Review Date**

**Agreement by parties involved in the development of this plan**

**DOCTOR’S SIGNATURE**  
**DATE**

**WORKER’S SIGNATURE**  
**DATE**

**EMPLOYER’S SIGNATURE**  
**DATE**

**Name and position of person signing on behalf of the employer**

**Return to Work Schedule / Roster**

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<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
<th>Total Hours</th>
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Workers' Compensation and Injury Management @ UWA
Appendix 2 *Hierarchy of Return to Work*

Can injured worker be rehabilitated back into: -

- Same position
  - Same Faculty/School/Section
    - NO
    - Same position, modified duties
      - Same Faculty/School/Section
        - NO
        - Alternative position
          - Same Faculty/School/Section
            - NO
            - Alternative placement - different Section of UWA or External Employer

Injury management staff in UWA Safety and Health will assist.
May involve external rehabilitation provider.

- The above is at the direction and upon advice from the injured workers’ treating medical practitioner.
- Where alternative internal positions are sought due to the injured worker not being likely to return to their pre injury duties or position, referral to the UWA Mobility Officer usually occurs.
- Injured workers are required to apply for alternative positions as per normal recruitment processes, however work trials and incentives to the host area may be provided to assist the process, aiming for a "win, win" situation.
### Travel Reimbursement Form

<table>
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<th>Destination</th>
<th>Reason</th>
<th>Distance of Return Journey</th>
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To ensure prompt reimbursement, ensure all sections of this form are completed correctly.

I declare that the above journeys are in relation to my worker’s compensation claim.

Signed

Date

If convenient, get your GP to sign off any trips which were to visit him or her, especially if a Medical Certificate was not issued. This will enable prompt reimbursement.

Please forward this invoice to UWA SAFETY & HEALTH M350
Version 1 2008

For more information on these programmes please contact:

**Safety and Health**
The University of Western Australia
M350, 35 Stirling Highway, Crawley WA 6009

Tel  +61 8 6488 3938
Fax  +61 8 6488 1179
Email  safety@uwa.edu.au
Web  www.safety.uwa.edu.au