



UNSW Program

Control number	OHS206-2006
Responsible Officer	Workers Compensation Manager
Authorisation	Vice Chancellor
Contact Officer	Workers Compensation Manager
Effective Date	January 2006
Review Commencement Date	The Return to Work Program will be reviewed every 2 years in accordance to NSW Workers Compensation Legislation.
File Number	Trim Administrative File Number 2006/0157

1. Introduction

This Workplace Return-to-Work Program forms a component of the University's overall system of Workplace Injury Management and should be read in conjunction with the UNSW Workplace Injury Management Program (NSW Campuses). This can be viewed at http://www.hr.unsw.edu.au/ohswc/ohswc_home.html.

The return to work of injured employees is an integral part of the workers compensation system in NSW. The underlying principle is that the workplace, and not a medical institution or the home, is often the most appropriate and effective place to rehabilitate the majority of injured employees. Another major principle is that all parties at the workplace have a social and economic interest in ensuring that employees return to work safely, as soon as possible following a work-related injury or illness.

Occupational rehabilitation is a managed process, usually at the workplace, aimed at maintaining injured or ill employees in, or returning them to, suitable employment. It involves early intervention with appropriate, adequate and timely services based on assessment of the injured employee's needs.

The rehabilitation process, which is based on current medical advice, aims to return injured employees to work according to the following hierarchy of goals:

1. Same duties/same employer
2. Modified or reasonably adjusted duties/same employer
3. Different duties/same employer
4. Same duties/different employer
5. Different duties/different employer

In particular circumstances, medical retirement or termination of employment due to ill health may need to be considered. However, this will only be after all other applicable options have been pursued and exhausted.

2. Scope

The UNSW Return to Work Program applies to all UNSW employees (UNSW employees at ADFA are covered separately under ACT Legislation).

3. Self-Insurance Statement

For the purpose of injury management and workers compensation, UNSW is a licensed self-insurer under Section 211 of the NSW Workers Compensation Act 1987.

4. Occupational Health & Safety Commitment

UNSW recognises its obligations under the NSW Occupational Health and Safety Act 2000 and is committed to preventing occupational injury and/or illness and aims to provide a physically safe, healthy and secure learning and working environment for all staff, students, contractors and visitors. To assist in achieving this goal, everyone attending a UNSW workplace is required to ensure their actions do not adversely affect the health and safety of others.

UNSW recognises the benefits of risk identification, assessment and control for the prevention of workplace injuries and illness and investigates incidents in a spirit of "no blame".

UNSW Management will consult with employees through the OHS Committees, OHS representatives and Unions in developing, implementing and reviewing UNSW OHS policies and the UNSW OHS Strategic Management Plan.

5. Occupational Rehabilitation Commitment

Section 52 of the NSW Workplace Injury Management and Workers Compensation Act 1998 states that:

"An employer must establish a return-to-work program with respect to policies and procedures for the rehabilitation (and, if necessary, vocational re-education) of any injured workers of the employer. An employer's return-to-work program must not be inconsistent with the injury management program of the employer's insurer and is of no effect to the extent of any such inconsistency."

As a licensed self-insurer under workers compensation legislation in NSW and in accordance with legislative requirements UNSW is committed to:

Preventing occupational injury and illness by taking all reasonable precautions to protect the health, safety and welfare of its staff, students, contractors and visitors while they are on University premises or engaged in approved work for UNSW.

Ensuring that the process of occupational rehabilitation is commenced as soon as possible after an injury in a manner consistent with medical advice.

Ensuring that returning to work as soon as possible following an occupational injury or illness is the normal practice and expectation.

Providing suitable duties or suitable employment, where practicable, to an injured employee as an integral part of the rehabilitation process.

Consulting and involving employees in the development and implementation of the UNSW

Workplace Return-to-Work Program and, when required, in their individual return-to-work (RTW) plan.

Ensuring that an injured employee will not be disadvantaged by participating in a RTW plan that is designed to return the employee to their pre-injury status.

Treating all rehabilitation records and information confidentially in accordance with the NSW WorkCover Authority's *Guidelines for Confidentiality of Rehabilitation Information*. (Appendix A).

6. Obligations

6.1 UNSW

- Ensure the health, safety and welfare of all employees, students, contractors and visitors.
- Reinforce to managers/supervisors the requirement to rectify or act on any hazardous condition, incident, workplace injury or illness to assist in preventing any re-occurrences of such events or conditions.
- Encourage managers, supervisors and employees to demonstrate commitment to the process of workplace occupational rehabilitation.
- Ensure the role of the Return-to-Work Co-ordinator is filled by a suitably qualified person, in accordance with WorkCover guidelines.
- Develop, implement and review the Workplace Return-to-Work Program in consultation with employees.
- Provide adequate and timely information and/or training to employees regarding the Workplace Return-to-Work Program.
- Allow accredited rehabilitation providers (ARPs) reasonable access to the workplace to perform assessments and to develop RTW plans for injured employees if required.
- Ensure that where injured employees are unable to resume their full pre-injury duties that the University consider the provision of reasonably adjusted duties, or access to suitable alternative employment (including access to vocational retraining), where practicable.
- Advise the injured employee they may seek the involvement of their Union representative in their rehabilitation if they wish to do so.

6.2 Employee

- To take reasonable care in the performance of their duties to prevent work related injuries or illness to themselves or others and report immediately any hazardous condition or incident to their supervisor for appropriate action.
- In the case of work related injury or illness, to take immediate steps to seek first aid and/or medical attention and notify their supervisor as soon as possible after a workplace injury or illness happens.
- Advise their supervisor of any medical and rehabilitation action recommended to treat the injury, including presenting WorkCover medical certificates provided by the nominated treating doctor(s).

- Co-operate with the University so that it can meet its employer return-to-work obligations and make all reasonable efforts to facilitate a timely return to work.
- Request that any recommendations on their capacity to perform work be documented by their nominated treating doctor on a WorkCover medical certificate and to present those certificates to their immediate supervisor and/or OHS & Workers Compensation.
- Specify one nominated treating doctor or medical practice who is prepared to participate in the development and implementation of the injury management plan (IMP) and the RTW plan. To give consent to the nominated treating doctor to provide information to UNSW for the purposes of an IMP and/or RTW plan.
- Participate in and comply with an IMP and/or RTW plan and co-operate with reasonable workplace changes designed to assist the return to work of fellow employees.
- In the case where the injured employee is receiving treatment, the times at which the worker will attend for treatment will be included in the RTW plans and will be negotiated with the supervisor and the injured employee. Treatment should be obtained by injured employees out of working hours whenever practicable.

Injured employees should be aware that if they unreasonably refuse to cooperate with their IMP and/or RTW plan, weekly benefits can be suspended. Before suspending benefits the employee must be notified in writing giving reasons for the suspension and what the employee must do to prevent the suspension.

6.3 Immediate Supervisor

- Ensure that the injured employee receives, or is referred for, first aid and/or medical attention, as appropriate for the severity of the injury.
- Contact OHS & Workers Compensation as soon as the supervisor is aware that an injury or an illness has occurred.
- Advise the injured employee to contact OHS & Workers Compensation within 48 hours so that sufficient information can be obtained to commence the workers compensation process, including a decision on claim liability and payment of benefits.
- Notify the Return-to-Work Coordinator immediately when given a medical certificate indicating an injured employee cannot perform their full duties and is fit for suitable duties.
- Ensure that any recommendations from the injured employee's nominated treating doctor are abided by until an adequate assessment can be performed by the Return-to-Work Coordinator.
- Complete an *Incident and Work-Related Illness / Injury Report* form (see Appendix B) with the employee as soon as possible following the incident or onset of a work-related illness. The form can be viewed and downloaded from OHS & Workers Compensation website at:
http://www.hr.unsw.edu.au/ohswc/ohs/docs/frm_OHS002.doc
- Rectify or act on any hazardous condition, incident, workplace injury or illness to assist in preventing any re-occurrences of such events or conditions.
- Assist the Return-to-Work Coordinator (and rehabilitation provider if involved) in nominating potential suitable duties (within their area of control) for consideration in the injured employee's RTW plan.

- Ensure the provision of any training or modifications to equipment, work stations or work processes, as agreed to as part of the injured employee's RTW plan. (The individual work unit will usually meet these costs).
- Ensure that any colleagues of the injured employee or other key work unit personnel are sensitively advised of any relevant matters pertaining to the injured employee's RTW plan. 'Relevant matters' can include, eg. variation in hours worked, variation in duties to be performed, medical restrictions and any assistance that may need to be provided to the injured employee.
- Monitor and sensitively handle the injured employee's progress on his/her RTW plan and liaise with the Return-to-Work Coordinator regarding any change, problems or unplanned absences.

6.4 Return-to-Work Coordinator

The role of the Return-to-Work Coordinator is to -

- Develop, implement and review the RTW plan (*see Appendix E*) and the IMP (*see Appendix F*) at appropriate intervals and distribute to relevant parties.
- Provide information to the injured employee on the injury management and return to work processes and refer him/her to the UNSW claims staff for information on their entitlements, if relevant.
- Maintain confidential case records in accordance to legislative requirements (Privacy and Personal Information Protection Act 1998 and Health Records and Information Privacy Act 2002) and abide by NSW WorkCover Authority's *Guidelines for Confidentiality of Rehabilitation Information* for access to rehabilitation records and consent to release information (*Appendix A*).
- Obtain the injured employee's consent before obtaining or releasing rehabilitation information.
- Determine the injured employee's needs by discussion with the employee, the supervisor, the nominated treating doctor and any other relevant parties involved in the injured employee's rehabilitation. In cases where the injury is significant (employee is unable to perform their normal duties for seven (7) days or more, whether or not any of those days are work days and whether or not the incapacity is full or partial or a combination of both), the Injury Management Contact Sheet will be completed (*see Appendix D*).
- Identify appropriate suitable duties and assist the injured employee to return to work as soon as possible and refer to a rehabilitation provider if required.
- Assist in the redeployment of injured employees when an injured employee cannot return to their pre-injury duties (*see 7.3 for further detail*).
- Ensure that assistance is provided to injured employees who speak languages other than English to understand correspondence and their obligations. This may include arranging interpreter services.

6.5 Nominated Treating Doctor

The nominated treating doctor is a doctor nominated by the injured employee who is prepared

to assist with the development, implementation and review of both the IMP and RTW plan. The nominated treating doctor is responsible for –

- Completing WorkCover medical certificates
- Arranging appropriate treatment
- Certifying fitness for work
- Advising on the suitability of duties on return to work and specifying work restrictions
- Providing information in relation to IMP's and RTW plans for injured employees

7. Procedures

7.1 When an Injury Occurs

All work-related injuries and illnesses must be reported to the immediate supervisor as soon as practicable, and an Incident and Work Related Illness / Injury Report Form completed. The form is available for viewing and downloading from OHS & Workers Compensation website.

Depending on the severity of the injury, and the employee's preference, the injured employee should seek appropriate first aid/medical attention from one or more of the following:

1. A certified First Aid Officer in your area
2. An Ambulance Officer (Dial 56666)
3. The nearest available hospital or medical facility, such as (in the case of Kensington Campus):
 - Prince of Wales Hospital, Randwick
(Adult Emergency is accessed from Barker Street)
 - University Health Service, Lower Ground Floor, Quadrangle Building
4. His/her treating/local doctor

Supervisors should be aware that the injured employee retains the right of choice of medical services.

7.2 Following Injury

When advised that an employee will require medical or other treatment and/or time off work for an injury/condition, the supervisor must refer the employee to OHS & Workers Compensation, for advice on their eligibility for workers compensation and rehabilitation. Location details are as follows:

Human Resources
Level 1, The Chancellery
Phone: 9385 -1107 Fax: 9663 - 4203

Referrals to the Return-to-Work Coordinator may also be made directly by the injured employee, their nominated treating doctor, their union or by staff of the Human Resources Department.

Once notified, the Return-to-Work Coordinator will coordinate the injury management process as identified in 6.4.

Rehabilitation may not be necessary in all cases of work-related injury. However, early assessment of the need for rehabilitation is critical.

7.3 Redeployment Process

Consultation with the injured employee's immediate work area will occur when it is determined that they are unable to return to their pre-injury duties. This occurs when the nominated treating

doctor advises that maximal medical improvement has been reached. Staff from OHS & Workers Compensation will assist the work area in assessing whether alternate duties offered accommodate the medical restrictions.

In cases where the immediate work area is unable to offer alternate duties, consultation at the Faculty / Divisional Level or with the UNSW Re-Deployment Officer (located in Human Resources) by the staff from OHS & Workers Compensation will occur to determine the possible availability of alternate duties (that adhere to the recommended medical restrictions) within UNSW.

The injured employee will usually be referred to a rehabilitation provider where an assessment will be completed to further assist with the identification of other vocational skills for alternate employment either within UNSW or external to UNSW.

7.4 Involving a Rehabilitation Provider

The Return-to-Work Coordinator may need to enlist the services of an accredited rehabilitation provider (ARP) in cases where:

- The injured employee is likely to have an extended period of total incapacity.
- There is difficulty in identifying suitable duties.
- The injured employee is unlikely to resume full pre-injury duties in the long-term.

Rehabilitation providers are health professionals (from the disciplines of physiotherapy, occupational therapy, counselling and medicine) accredited by WorkCover NSW to provide specific rehabilitation related services. Examples of these services are as follows:

Initial assessment, workplace assessment, functional assessment, monitoring of individual RTW plans, provision of equipment, education and advice regarding management of an injury, pain management and psychological counselling, vocational assessment and counselling, organising vocational retraining and related activities, work conditioning/exercise programs, medical assessment.

The nominated rehabilitation providers for UNSW are:

- Konekt Ph. 1800 680 633
(Offices are located throughout the Sydney area and all areas of NSW).
- Commonwealth Rehabilitation Service
(Offices are located throughout the Sydney area and also other areas of Australia).
- Workers Health Centre *(Nominated by Union[s])*
133 Parramatta Road
Granville NSW 2142 Ph: 9897-2466

A full list of occupational rehabilitation providers in NSW is available at WorkCover's website: <http://www.workcover.nsw.gov.au>

Injured employees retain the right to select and/or change their own provider, if it is necessary, during their rehabilitation.

7.5 Nominated Occupational Physicians

Immex Green Square
561 Botany Road
Alexandria NSW 2017

Ph: 9319-5999

7.6 Provision of Suitable Duties

According to the hierarchy of rehabilitation goals (see 1. Introduction) the initial focus will be on maintaining the employee in, or returning the employee to, their pre-injury employment.

Where it is medically identified that the employee will be initially unable to complete their full pre-injury duties, the following should be consulted to determine suitable temporary duties:

- Return-to-Work Coordinator
- Injured employee
- Manager(s) or supervisor(s)
- Treatment provider(s), e.g. nominated treating doctor
- Accredited rehabilitation provider (where involved)
- Union representative (where requested by employee)

Suitable duties should be productive and meaningful. They could take different forms, for example the same duties but with reduced hours, or modified and/or alternative duties in the same or different work area. In the majority of cases suitable duties will only need to be provided for a temporary period until the injured employee is fit to resume the full duties of his or her pre-injury position.

When suitable duties are identified and agreed to, they will be specified in a written RTW plan and signed by the supervisor, the employee, and the nominated treating doctor (*Appendix E*).

7.7 Case Management Procedures

The following case management procedures should be followed so that individual RTW plans are developed and managed effectively, for injured employees requiring rehabilitation.

1. A prompt assessment of the need for occupational rehabilitation following injury should be made (as outlined in **6.4 Return-to-Work Coordinator**).
2. The Return-to-Work Coordinator will establish and maintain a confidential rehabilitation file on each injured employee requiring rehabilitation.
3. An IMP will be developed by the Return-to-Work Coordinator for injured employees who have a significant injury.
4. An individual RTW plan will be developed by the Return-to-Work Co-ordinator (or ARP if involved) when the injured employee has been assessed to resume work on suitable duties as per medical advice. In the case of significant injuries, the RTW plan forms part of the Injury Management process.
5. The RTW plan shall be structured in a manner consistent with Appendix E.
6. In developing RTW Plans for injured employees the following will be considered:
 - a. The special needs of individual employees (eg. employees of a non-English speaking background).
 - b. The personal circumstances of injured employees that may impact on suitable duties (eg. child care arrangements).
 - c. The identification and modification of any factors that may have contributed to the injury.
 - d. Ways to minimise the workload impact on other employees in the work area;

- and
- e. Industrial or other issues that may impact on the workplace.
- f. When requested by the injured employee, union representatives will be involved in the development of individual RTW plans.

7.8 Reasonable Adjustment

In cases where an injury or disability or illness is not covered by workers compensation, UNSW employee's can apply for assistance in making changes to the workplace to accommodate the disability. For further information about Reasonable Adjustment, please refer to the UNSW Reasonable Adjustment Guidelines available at: <http://www.infonet.unsw.edu.au/poldoc/97rag412.htm> or contact the Equity and Diversity Unit.

7.9 Return to work following non-work related injury / illness

In cases where a UNSW employee has been unable to work due to a non-work related injury / illness, and medical restrictions have been recommended for their return to work, the worker's manager / supervisor should contact the UNSW Return to Work Coordinator, who can provide assistance in facilitating a safe and durable return to work.

8. Consultation with Employees

The review process for the UNSW Workplace Return-to-Work Program (NSW Campuses), Commitments and Procedures will include consultation with University employees co-ordinated through the Level 3 Occupational Health and Safety Committees and the unions.

Employees will be informed of their rights and responsibilities with regard to the UNSW Workplace Return-to-Work Program (NSW Campuses), Commitments and Procedures.

9. Dispute Resolution

All parties should be involved in monitoring the effectiveness of the Workplace Return-to-Work Program in a spirit of co-operation. Successful rehabilitation of injured employees should be the paramount concern.

If there is a dispute over an individual rehabilitation case the dispute should be handled in the following manner:

1. The Return-to-Work Coordinator will attempt to resolve the dispute by co-ordinating discussions with, as appropriate, the employee, the rehabilitation team (i.e. doctors, ARP if involved), supervisors/managers and, where requested, the employee's union.
2. Where the parties have not been able to resolve the matter in dispute, the matter may, at the instigation of either party, be referred to the WorkCover Claims Assistant Service - (ph: 13 10 50) for mediation or conciliation.

10. Conclusion

The policies and procedures contained in this Workplace Rehabilitation Program will come into effect as of **01 February 2006**.

In consultation with the unions and level 3 Occupational Health and Safety Committees this Program:

- Will be reviewed 2 years from the date of effect; or
- If necessary, may be reviewed and amended before this date.

Professor Mark Wainwright
Vice-Chancellor

11. References:

- Guidelines for Employers Workplace Rehabilitation Programs (NSW WorkCover publication), as revised April 2003.
- Guidelines for Confidentiality of Rehabilitation Information
(*The above references can be located at <http://workcover.nsw.gov>*)
- Health Records and Information Privacy Act 2002
- NSW Workers Compensation (Workplace Rehabilitation Programs) Regulation 1995, as amended in 1997 and 1999.
- Privacy and Personal Information Protection Act 1998
- UNSW Reasonable Adjustment Guidelines for Managers of Staff and Potential Staff with Disabilities (*<http://www.infonet.unsw.edu.au/poldoc/97rag412.htm>*)
- UNSW Record Keeping Policy,
(*<http://www.infonet.unsw.edu.au/ras/policy/recordkeeping.htm>*)
- Workers Compensation Act 1987
- Workplace Injury Management and Workers Compensation Act 1998

APPENDIX A

Confidentiality of Injury Management Information

Introduction

During the injury management process the following information should be considered in regards to the University's need for information to effectively manage the injury management process, but also to protect the injured employee's right to privacy.

What is injury management information?

Injury management information is any information that involves the treatment, rehabilitation, retraining and claims management practices that are directed to assisting an injured employee to return to work.

It includes:

- File notes, letters, faxes and RTW plans completed by the Rehabilitation Co-ordinator
- Treating doctor assessment and reports
- Specialist doctor assessment and reports if the injured employee was referred to the specialist by the treating doctor
- Injury Management Consultant reports

Injury management information does not include:

- Copies of medical-legal reports initiated by the Claims Officer
- Claims print out of claims estimates and premium costs
- Common law and legal proceedings

Confidentiality of Information

All injury management information concerning an injury employee is confidential. Such information should not be discussed with or shown to or read by anyone who is not directly involved in the employee's return to work.

Obtaining or releasing injury management information

- The WorkCover medical certificate includes a section for the employee to sign, giving consent to the Nominated Treating Doctor, the employer, other treating practitioners and WorkCover NSW to exchange information for the purpose of managing the employee's injury and compensation claim.
- The University of New South Wales is a party to this consent and can release information to the relevant parties as specified on the medical certificate.

- To ensure the informed consent of the injured employee and that all parties involved in the return to work are included, consent should be obtained by having the worker sign an "*Information Consent Form*". If necessary, interpreter services may be used to assist the employee.
- The employee's consent to The University of New South Wales may be withdrawn at any time. However employees should be advised that, if consent is withdrawn, return to work may not proceed and it may affect the employee's entitlements to workers compensation benefits.

Management of records

- Files, including electronically stored information, should be secure from unauthorised access, interference, misuse, loss and theft. Files should be stored in lockable cabinets at the end of each day or when they are not in use.

Transmission of Information

- Where information is transmitted electronically (eg. by fax) care should be taken to protect the confidentiality of the information. For example, prior to faxing information, telephone the recipient to arrange for its collection immediately after transmission.

APPENDIX B

Final



OHS002

**Incident and
Work Related Illness/Injury Report**

Version: September 27 Incident number: Page 1

PART A To be completed by employee, student, visitor or contractor

Personal Details

Title:	Family Name:	First Name:	Staff/student number:
Email:	Phone (w):	Phone (h):	Mobile:
Faculty/Division:	School/Unit:		
<input type="checkbox"/> Employee	<input type="checkbox"/> Student	<input type="checkbox"/> Contractor	<input type="checkbox"/> Visitor Other:
Position:	Gender:	<input type="checkbox"/> Male	<input type="checkbox"/> Female
Residential address:			

Incident details

Tick one box only	<input type="checkbox"/> Incident with no injury or illness	<input type="checkbox"/> Work related illness	<input type="checkbox"/> Work related injury
Date incident occurred:	/ /	Time of incident:	am/pm
Date of onset of symptoms (if applicable): / /			
Date incident reported:	/ /	To whom was the incident first reported:	
Incident location:	<input type="checkbox"/> On campus	<input type="checkbox"/> Off campus	<input type="checkbox"/> On fieldwork <input type="checkbox"/> On journey to or from work
Describe location of incident as follows: building name, room number or street address or fieldwork site			
Names and contact details of any witnesses:			
Attach additional information if space insufficient including sketches and photographs			

Injury details**Complete sections A, B and C if injury/illness occurred****A. Part of body injured**

? ankle, left / right	? arm, left / right	? back	? chest	? elbow, left / right	? ear, left / right
? eye, left / right	? face	? fingers	? foot, left / right	? hand, left / right	? head
? groin	? knee, left / right	? leg, left / right	? lungs	? mouth	? neck
? psychological system	? shoulder	? stomach	? teeth	? toes	? wrist, left/right

Other:

B. Nature of injury

? amputation	? anxiety	? asthma	? bruising/crushing	? burns	? concussion	? depression
? fracture	? infectious disease	? laceration	? needle-stick	? OOS	? poisoning	? rash
? sharps injury	? sprain/strain	? trauma to joints and ligaments	? trauma to muscles and tendons	? zoonoses		

Other:

C. Type of incident

? bending, stretching	? bit by animal	? bite/sting by insect	? chemical exposure	? contact with cold object	? contact with hot object	? electricity
? falling from same level	? falling from height	? hit by animal	? hitting stationary	? lifting	? noise exposure	? repetitive muscle injury
? psychological	? pulling, pushing	? radiation exposure	? struck by moving object	? sunstroke	? vehicle accident	? weather exposure

Other:

Details of treatment and work status

Did you receive First Aid?	? Yes ? No	Name of First Aider:
Did you see a doctor?	? Yes ? No ? Not Yet	Did the doctor issue a WorkCover medical certificate?
Did you cease work?	? Yes ? No	Date and time of cessation: Date and time of return:
Did you cease study?	? Yes ? No	Date and time of cessation: Date and time of return:
Did you go to hospital?	? Yes ? No	If yes, state which hospital:

Action

Employee, student, visitor or contractor to complete Part A and send to Supervisor within 1 working day.
Supervisor to complete Part B and distribute copies of form (as per Section 14) within 2 working days of notification of incident.
For students consult academic supervisor or program coordinator.

Signature

I approve the release of the information in this form to approved authorities, which may include medical practitioners, legal representatives, employee associations, insurance companies and WorkCover NSW.

Signature:

Date: / /

Privacy Statement

The personal information you provide on this form is protected by the NSW Privacy and Personal Information Protection Act 1998.

Access to the information you provide is only available to those persons authorised to access the information in the course of their duties to The University of New South Wales.

OHS002 Incident and Work Related Illness/Injury Report

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OHS002 Incident and Work Related Illness/Injury Report

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PART B To be completed by supervisor

Incident number: Incident date: / / Incident reported by:

Immediate incident management response

? Security notified on x56666 ? Supervisor notified ? First Aid Officer notified ? Floor warden notified

? Other:

Contributing factors

? Slip/trip/fall hazard ? Risk assessment incomplete ? Personal Protective Equipment not worn or not available ? Insufficient training

? Lifting equipment not used ? Workplace ergonomics ? Electrical hazard ? Weather

? Other:

Risk rating

The risk rating of an incident is based on a combination of Consequence and Probability. Please complete the following table by referring to the [UNSW Risk Rating System](http://www.riskman.unsw.edu.au) available at www.riskman.unsw.edu.au. Circle one option only in each section below.

Consequence	1	2	3	4	5	Probability	A	B	C	D	Risk Rating	Low	Medium	High	Extreme
						E									

Corrective Action Plan

To complete the following Corrective Action Plan use the following Hierarchy of Risk Controls. Give priority to eliminating the hazard.

1. Eliminate 2. Substitute 3. Engineering control 4. Administrative control 5. Personal Protective Equipment

Actions recommended to be taken	By whom	By when
A.		
B.		
C.		
D.		

Help

In the first instance contact your Supervisor, your OHS Representative or your OHS Committee Chairperson.

The Risk Management Unit may be contacted by phone on 93851565 or by fax on 93852365 for OHS & Environment or on 93851107 or by fax on 96634203 for Workers Compensation

Send copies to:

1. Send original report to Manager, Workers Compensation, RMU
2. Forward copies to the following:
 - a. Chairperson of your Workplace OHS Committee or OHS Representative
 - b. Faculty/Divisional OHS Coordinator (if applicable)
 - c. Manager, OHS & Environment, RMU
 - d. Retain copy in your School/Divisional Unit Incident Register

Signature

I approve the release of the information in this form to approved authorities, which may include medical practitioners, legal representatives, employee associations, insurance companies and WorkCover NSW.

Supervisor's name: _____ Supervisor's signature: _____ Date: / /

Contact phone number: _____ email address: _____

Office use only

Worker's Compensation database	/ /	OHS staff telephone follow-up	/ /
Incident database	/ /	OHS staff site investigation	/ /
WorkCover notified	/ /	OHS Committee investigation	/ /

APPENDIX C

UNSW



INFORMATION CONSENT and DECLARATION

A) INFORMATION CONSENT

Claim No: _____

I _____ (name) authorise the University of New South Wales to:

OBTAIN and **RELEASE** information concerning my injury management to the parties listed below (insert specific names). Information about your injury management may also be discussed with any of these parties.

a) Employer Representative: _____

b) Doctor: _____

c) Hospital: _____

d) Rehabilitation Provider: _____

e) The Union: _____

f) My Solicitor: _____

B) INJURED EMPLOYEE DECLARATION

I consent to personal information being collected by the University about me for use in assessing and managing my workers compensation claim. I understand that if any information I have given in relation to my claim is untrue, that my claim may be denied and that I may be prosecuted.

(A photocopy of this form shall be as valid as the original).

Signature: _____

Date: _____ / _____ / _____

Interpreters Signature: _____

Name _____

APPENDIX D

Injury Management Contact Sheet

Name:	Notification received by:
Date of Accident:	Notification Date:
Significant Injury Date:	Claim No:
Injury Management Plan Due:	Provisional Liability Due:

Contact with Worker

Date completed: _____

Completed by: _____

Outcome / Actions Required

2. Contact with Supervisor

Date completed: _____

Completed by: _____

Outcome / Actions Required

3. Contact with Doctor

Date Completed: _____

Completed by: _____

Outcome / Actions Required

Completed By: _____ Date: _____

RETURN TO WORK PLAN 1

Worker's NAME:

Date of Injury:

Position TITLE:

Location:

Nature of Injury: **Supervisor:**
Bodily Location:
Date Plan Prepared: January 25, 2007
Rehabilitation Goal: Return to full pre-injury duties

Rehabilitation Plan effective from: **to:**

Stage 1

From: **To:**

Duties to be PERFORMED:

Duties to be AVOIDED:

- 1.
- 2.
- 3.

Medical Restrictions:

- 1.
- 2.

Other Considerations:

HOURS to be worked & WAGES: Your hours of duty and wages will be identical to your pre-injury levels.

Stage 2

From: **To:**

Duties to be PERFORMED:

Duties to be AVOIDED:

- 1.
- 2.
- 3.

Medical Restrictions:

- 1.
- 2.

--

Other Considerations:

HOURS to be worked & WAGES: Your hours of duty and wages will be identical to your pre-injury levels.

MONITORING: **Annette MacManus** (Rehabilitation Co-ordinator). **Please telephone me**
each Tuesday on 9385-3784.

REVIEW Date: Dr.____ will review you on or before _____. Please ensure this appointment is kept.

This plan has been developed in consultation with the injured worker, his/ her supervisor and his/ her nominated treating doctor.

The following parties agree to the following return to work plan:

Injured Worker _____ Date: _____
Supervisor _____ Date: _____
Nominated Treating Doctor _____ Date: _____

Please sign and return fax to 9663 4203

Annette MacManus
Rehabilitation Co-ordinator

Copies to:

INJURY MANAGEMENT PLAN

An Injury Management Plan is a plan for co-coordinating and managing those aspects of injury management that concern the treatment, rehabilitation and retraining of an injured worker, for the purpose of achieving a timely, safe and durable return to work for the worker.

Section 42(1) of the Workplace Injury Management & Workers Compensation Act 1998 ("the Act")

Employee Details	
Name	
Occupation	
Faculty/School/Department/Unit	
Supervisor	
Injury Details	
Date of Injury	
Nature of Injury	
Bodily Location	
Nominated Treating Doctor	

Injury Management Details		
Date Reported		
Initial Contact with Employee		
WorkCover Certificate		
Date of Total Incapacity		
Date of Partial Incapacity		
Injury Management Goal		
Suitable duties available (Y/N)		
Rehabilitation (Return to Work) Plan (Y/N)		
Plan of Action	By Whom	When
Review and advise on treatment, fitness for work and physical restrictions.	Dr. <name> (Nominated Treating Doctor)	As reasonably necessary.
Liaise with all relevant parties involved in the injury management and rehabilitation processes.	Annette MacManus (Rehabilitation Coordinator)	From <date> and during period of rehabilitation.
Co-ordinate and monitor Injury Management and RTW Plans.	Annette MacManus (Rehabilitation Coordinator)	From <date> and during period of rehabilitation.
Assess and /or advise on suitable duties.	Annette MacManus (Rehabilitation Coordinator)	As necessary to achieve the injury management goal.
Arrange consultations and liaise with the Injury Management Consultant and Occupational Physician.	Alecia Ford (Claims Officer)	As required for claims and/or injury management processes.
Provide suitable duties if possible.	<name>	From <date> and during period of rehabilitation
Comply with treatment and restrictions on RTW plan.	<name>	From <date> and during period of rehabilitation
Attend medical and treatment appointments.	<name>	As required.
Advise Rehabilitation Co-coordinator of any change in symptoms or work status.	<name>	As soon as possible.

Plan developed by: Annette MacManus (Rehabilitation Coordinator)

Date:

Injury Management Plan Review Date: At significant changes of injury management or at least every 3 months

I have read and understood and agree to participate in this Injury Management Plan

Signed: _____

Date: _____

(Injured Employee)

(Please ensure that you read the information on the back of this Plan)

UNSW is a self-insurer under the Act. Contact details are as follows:

Insurer Contact:

Alecia Ford
Risk Management Unit
Workers Compensation and Injury Management
The Golf House
UNSW SYDNEY, 2052
Ph. 9385 1107

Rehabilitation Coordinator:

Annette MacManus
Risk Management Unit
Workers Compensation and Injury Management
The Golf House
UNSW SYDNEY, 2052
Ph. 9385 3784

Nominated Treating Doctor:

The injured employee must nominate a treating medical practitioner who is prepared to assist with the development of, and continue to be involved in, the Injury Management Plan. The injured employee must authorise the nominated treating doctor to provide relevant information for the purpose of an Injury Management Plan.

Procedures to change the nominated treating doctor:

Requests to change the nominated treating doctor will be reviewed on a case by case basis. The procedure for documenting a request to change the nominated treating doctor is by submitting the request in writing either by facsimile, e-mail or by mail stating the reasons for changing the nominated treating doctor and the name, address and phone number of the doctor preferred to take over the role.

Reasons for not accepting a request to change the nominated treated doctor include:

- Documented evidence of the injured employee's lack of co-operation/participation with treatment.

- ❑ The injured employee's avoidance of return to work, despite being certified fit to do so.

If the doctor nominated by the injured employee does not participate or co-operate in the establishment and ongoing conduct of an Injury Management Plan, the employee will be referred to a doctor who will take over this role.

Employer Obligations

- ❑ A workplace injury that is likely to result in the injured employee not being able to perform part or all of their normal duties for a continuous period of more than 7 days, whether or not any of those days are work days, is considered to be significant within the meaning of the Act and an Injury Management Plan must be established for the injured employee. The Plan will be established by the Rehabilitation Coordinator or the Claims Officer.
- ❑ The Injury Management Plan must be established in consultation with the injured employee and the employee's nominated treating doctor.
- ❑ The injured employee must be provided with information with respect to the Injury Management Plan.
- ❑ The nominated treating doctor must be provided with any relevant information that will assist with the Injury Management Plan and the Return to work Plan.

Employee Obligations:

- ❑ Employees must notify their supervisor of any work-related injury or illness as soon as possible after the injury happens and of their ongoing medical and rehabilitation status.
- ❑ The injured employee must participate and cooperate with the Injury Management Plan and the Return to Work Plan as negotiated between the employee, the nominated treating doctor, the employee's supervisor and the Rehabilitation Coordinator or Claims Officer.
- ❑ The injured employee must make all reasonable efforts to return to work as soon as possible in accordance with medical advice and having regard to the nature of the injury.
- ❑ An injured employee who unreasonably fails to comply with the Injury Management Plan has no entitlement to weekly compensation for any period of non-compliance.