

A guide for employers

What to do if your worker is injured

March 2024





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Your injured worker's recovery and return to work is a team effort. It involves you, your WorkSafe agent, your worker and their health providers.

About WorkSafe Victoria

WorkSafe Victoria (WorkSafe) is responsible for administering Victoria's workers' compensation legislation and occupational health and safety (OHS) legislation.

WorkSafe provides compensation to workers for work-related injuries or illnesses. WorkSafe also aims to ensure the health and safety of people at work, and reduce the social and economic cost to the Victorian community of workplace injuries and illnesses.

The WorkCover scheme is a no-fault scheme. This means that a worker's entitlement to compensation is not linked to who is responsible for the injury or illness, but determined according to the legislation.

Your WorkSafe agent

WorkSafe agents perform most of the functions associated with managing claims. You are required to choose a WorkSafe agent (agent). The functions performed by agents on behalf of WorkSafe include:

- managing claims to ensure injured workers receive their entitlements
- · helping injured workers return to work
- collecting employer premiums.

Self-insurers

Self-insurers are employers approved by WorkSafe to manage their own injured workers' compensation claims.

When reading this booklet, any reference to an 'agent' should also be read as 'self-insurer'.

A list of the currently approved self-insurers can be found at **worksafe.vic.gov.au**.

Working together

A work-related injury or illness can have a big impact on your injured worker's life and the work they are able to do. They may not be able to do what they used to, either at work or at home.

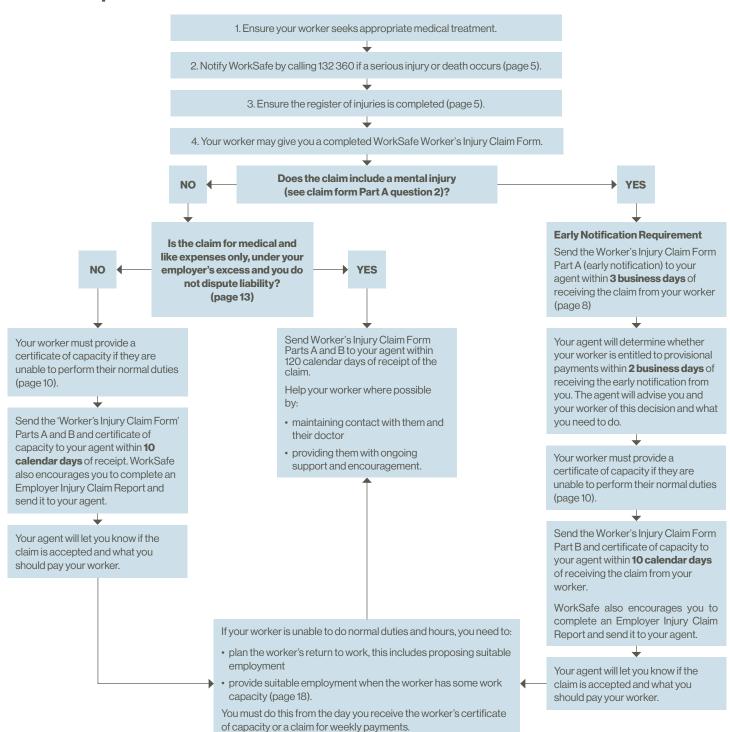
Your injured worker's return to work is a team effort. It involves you, your WorkSafe agent, your worker and their health providers.

When your worker has a work-related injury or illness, there are certain things you must both do. This is explained in more detail in the following pages.



What happens when your worker is injured

The claims process





What you need to do immediately

When one of your workers has a work-related injury or illness, you must take certain steps immediately.

1. Help your injured worker seek medical treatment

The first and most important thing you should do if your worker becomes injured or ill at work is help them get appropriate medical treatment. Your injured worker may choose their own doctor or healthcare provider.

It may be helpful to let your worker know they may be entitled to make a WorkSafe claim. Refer them to the fact sheet How to make a WorkSafe claim available from:

- · worksafe.vic.gov.au
- WorkSafe Advisory on 1800 136 089 or (03) 9641 1444.

2. Incident notification

If there's been a workplace incident that causes or could have caused serious injury or death, or any incident that requires notification, you must notify WorkSafe immediately on 132 360.

You must not interfere with the scene of the incident, except to:

- help an injured person
- protect someone whose health or safety is at risk
- prevent further injury.

You must also send a written record of the incident to WorkSafe within 48 hours and keep a copy in your records for 5 years. The easiest way to do this is to fill in an Incident Notification Form and send or fax it to your nearest WorkSafe Victoria office. You must keep this form at your workplace at all times.

You can obtain the form and a list of WorkSafe Victoria offices at worksafe.vic.gov.au or call WorkSafe Advisory on 1800 136 089 or (03) 9641 1444.

Information about incident notification can also be found in the publication A Guide to Incident Notification. available at worksafe.vic.gov.au

3. Ensure the injury is recorded in the Register of Injuries

If your injured worker or someone on their behalf, tells you about a work-related injury or illness, make sure they record all the details in the Register of Injuries. The Register of Injuries can be a diary, exercise book or electronic file where all the information is recorded.

You are required to tell all your workers about the register and make it readily accessible to your workers or any person acting on your workers' behalf.

You must advise your injured worker in writing that you have been notified of the injury or illness. A simple way of doing this is to provide them with a copy of their entry in the Register of Injuries.

Where a claim is of a confidential nature; for example, a stress-related condition, and sufficient information is included on the Worker's Injury Claim Form, the form will be accepted as the Register of Injuries.

Your register should include any information that might be helpful; for example, details of treatment received and whether your injured worker returned to work.

What you need to do immediately

Even if your register doesn't contain all the information, it's important to capture the main details of the injury.

The register must include:

- · your injured worker's name
- · their occupation or job title
- the time and date of the injury or illness (where available or the date your injured worker became aware of the injury or illness)
- the exact location of your injured worker when they were injured or became unwell
- exactly how the injury or illness occurred
- the nature of the injury or illness and what parts of their body were affected
- the names of any witnesses to the injury or illness
- the date you were notified of the injury or illness
- the name of the person completing the register, if they are not your injured worker.

The register of injuries can help you identify hazards in your workplace that need attention. You should look at the register regularly and make changes to your workplace where necessary to prevent further injuries. You should also record the actions you have taken to fix an unsafe situation identified in the register.

4. Provide your worker with relevant return to work information

Once you know a worker has been injured and has an incapacity for work, it is good practice to provide them with the following information:

- · your return to work obligations and how you are meeting these
- · your worker's return to work rights and obligations and where to get further information about these
- the name and contact details of your agent
- the name and contact details of your return to work coordinator
- the procedure for resolving return to work issues in your workplace.

You have an obligation to have this information available to all workers at all times (see page 18).

5. Don't ignore the early signs of injury or illness

If you or your worker notice the early signs of a work-related injury or illness, timely action and treatment can prevent it from getting worse. Talk to your worker and their supervisor about what changes could be made to help them stay at work. Continuing to work in a way that is safe and matches the person's capacity for work can support their rehabilitation.



For claims including a mental injury employers must:

- send the Worker's Injury Claim Form Part A (early notification) to their agent within 3 business days of receiving the claim
- send the Worker's Injury Claim Form Part B and all other relevant original documents to their agent within 10 calendar days of receiving the claim

For physical injury only claims:

Send all relevant original documents, including Parts A and B of the Worker's Injury Claim Form to your agent within 10 calendar days of receiving the claim.

The table on the following page outlines the steps you should take when a claim is made.

The steps will be different depending on whether your injured worker's claim is for:

- · a physical injury, a mental injury, or both
- weekly payments or for medical and like expenses only.

If the claim is for weekly payments, notify your agent of your injured worker's pre-injury average weekly earnings (PIAWE), entitlements to sick leave, annual leave and redundancy payments.

If the claim is for weekly payments, it will be automatically accepted if your agent receives it from you more than 38 calendar days after your worker gave it to you.

What you should not do

By law, if your worker gives you a Worker's Injury Claim Form, you cannot:



Refuse to take the form from your injured worker.



Dismiss your injured worker for making a claim.

Penalties

If you don't send a claim for weekly payments to your agent on time, you may incur penalties or face prosecution.

Sending in your claim within the set timeframes is important because it:

- allows your injured worker to receive their payments promptly
- enables your agent to help you return your worker to work more quickly
- · reduces claims costs overall, resulting in reduced premiums.

Steps to take when a claim is made

| | Claims including a mental injury | Physical injury only claims | | |
|--------|--|---|--|--|
| | | Weekly payments, physical injury only claim | Medical and like expenses only (above employer excess*), physical injury only claim | Medical and like expenses only (under employer excess*), physical injury only claim |
| Step1 | Complete the employer questions of the Worker's Injury Claim Form, sign and date it. Check that your worker has provided a certificate of capacity if they have made a claim for weekly payments. | Complete the employer questions of the Worker's Injury Claim Form, sign and date it. Check that your worker has provided a certificate of capacity. | Complete the employer questions of the Worker's Injury Claim Form, sign and date it. | Complete the employer questions of the Worker's Injury Claim Form, sign and date it. |
| Step 2 | Confirm receipt of your Worker's Injury Claim Form in writing. An easy way of doing this is to give your worker a copy of the claim form titled Worker's copy. | Confirm receipt of your Worker's Injury Claim Form in writing. An easy way of doing this is to give your worker a copy of the claim form titled Worker's copy. | Confirm receipt of your Worker's Injury Claim Form in writing. An easy way of doing this is to give your worker a copy of the claim form titled Worker's copy.# | Confirm receipt of your Worker's Injury Claim Form in writing. An easy way of doing this is to give your worker a copy of the claim form titled Worker's copy.# |
| Step 3 | Early notification requirement Send the Worker's Injury Claim Form Part A (early notification) to your agent within 3 business days of receiving the claim from. You must do this even if the claimant is not your worker. | No early notification requirement on physical injury only claims, however you may choose to provide early notification within 3 business days. | No early notification requirement on physical injury only claims, however you may choose to provide early notification within 3 business days. | No early notification requirement on physical injury only claims, however you may choose to provide early notification within 3 business days. |

Step 4

Send original documents to your agent within 10 calendar days of receiving the claim. Documents that must be sent are:

- Worker's Injury Claim Form Part B
- any certificates of capacity, if the claim includes weekly payments
- other relevant documents if available (e.g. accounts or witness statements).

WorkSafe also encourages employers to complete and provide an Employer Injury Claim Report. If you have reason to believe the claim should not be accepted, include this information in your report.

Send original documents to your agent within 10 calendar days of receiving the claim. Documents that must be sent are:

- Worker's Injury Claim Form Parts A and B
- · any certificates of capacity
- other relevant documents if available (e.g. accounts or witness statements).

WorkSafe also encourages employers to complete and provide an Employer Injury Claim Report[^]. If you have reason to believe the claim should not be accepted, include this information in your report.

Send original documents to your agent within 10 calendar days of your receipt of the claim. Documents that must be sent are:

- Worker's Injury Claim Form Parts A and B
- other relevant documents if available (e.g. accounts or witness statements).

WorkSafe also encourages employers to complete and provide an Employer Injury Claim Report[^]. If you have reason to believe the claim should not be accepted, include this information in your report.

If the claim goes above, or is likely to go above the excess, complete all the steps listed in column C of this table within the specified timeframes.

Otherwise:

Send original documents to your agent within 14 calendar days from the end of the quarter in which you received your Worker's Injury Claim Form (i.e. 31 March, 30 June, 30 Sept and 31 Dec).

Documents that should be sent are:

- Worker's Injury Claim Form
- any other relevant documents.

^{*} For the current employer excess, refer to worksafe.vic.gov.au.

[#]Signing your Worker's Injury Claim Form is not an acceptance of liability. It is only an acknowledgement that you have received the form.

[^] Employer Injury Claim Reports are available from post offices, your agent or WorkSafe Advisory by email to: info@worksafe.vic.gov.au or by phone on 1800 136 089 or (03) 96411444.

Send certificates to your agent as soon as you receive them so your injured worker gets the right treatment at the right time.

What if you don't have WorkCover insurance?

If you don't have WorkCover insurance, your injured worker still has the right to make a claim.

If your worker makes a claim for a work-related injury or illness, and you are an uninsured employer, then:

- if the claim includes a mental injury, you must:
 - send the Worker's Injury Claim Form Part A (early notification) to your agent within 3 business days of receiving the claim
 - send the Worker's Injury Claim Form Part B and other relevant original documents to WorkSafe within 5 calendar days of receiving the claim
- if the claim is for a physical injury only, you must:
 - send the Worker's Injury Claim Form Parts A and B, and other relevant documents to WorkSafe within
 5 calendar days of receiving the claim

WorkSafe also encourages employers to complete an Employer Injury Claim Report within 5 calendar days.

Send these documents to:

WorkSafe Victoria 1 Malop Street Geelong VIC 3220

If one of your workers makes a claim, you need to register for WorkCover insurance even if you don't otherwise meet the usual registration requirements, i.e. even if you don't:

- employ an apprentice or
- expect to pay more than \$7,500 in remuneration in that financial year.

For more information, contact WorkSafe Advisory on 1800 136 089 between 7:30 am and 6:30 pm, Monday to Friday.

Certificates of capacity

If your worker can't perform their normal duties and hours, they need to give you a certificate of capacity. This certificate is similar to a sick certificate. It should include details of their injury or illness, expected time off work and/or possible work restrictions that may enable them to return to or stay at work.

The first certificate of capacity can only be obtained from a medical practitioner and can only be valid for up to 14 calendar days. Your injured worker must continue to obtain valid certificates of capacity until they are able to return to their pre-injury duties and hours. Ongoing certificates of capacity are usually valid for up to 28 calendar days and can be obtained from medical practitioners or healthcare providers such as chiropractors, physiotherapists or osteopaths.

In certain circumstances, your agent can authorise ongoing certificates of capacity for periods longer than 28 calendar days.

For both initial and ongoing certificates, your worker has the right to see a healthcare provider of their choice.

Your injured worker must declare any work they've done and sign the declaration on the back of each certificate, in front of a witness.

If the claim is accepted, you must continue to make weekly payments to your worker for as long as they provide you with valid certificates, unless your agent tells you otherwise.

What should you do with ongoing certificates?

Progress your worker's return to work

Ongoing certificates of capacity are an important source of information about your worker's ability to return to work. They can help you progress and plan for your worker's return to work. Review your worker's certificate and ensure you understand the details about what your worker can and can't do. Clarify any aspects that you need to, and use this to further plan your worker's return to work. The certificate helps you ensure that any suitable employment arrangements in place are consistent with your worker's capacity for work.

This is important even when your worker has returned to work on full hours but still has an incapacity for work. You need to keep managing and appropriately progressing their return to work.

Send certificates of capacity to your agent as soon as you receive them

Send each certificate you receive to your agent as soon as possible. This helps your agent support you and contribute to the timely management of your worker's return to work. Your agent can ensure your injured worker gets the right treatment at the right time and this assists your injured worker return to work faster. It also ensures you are reimbursed promptly and may provide you with a long-term reduction in premium costs due to better management of claim costs overall.



Provisional payments for mental injury claims

Better support for mental injury

Victorian workers can access early treatment and support while they await the outcome of their mental injury claim. This support is called **provisional** payments.

Eligible workers can access provisional payments for reasonable treatment and services for up to 13 weeks, even if their claim is rejected.

If your worker has made a claim that includes a mental injury, you have an early notification obligation – see page 7. Once you have provided the early notification to your agent, the agent is required to determine if your worker is entitled to provisional payments within 2 business days of receiving the early notification from you.

Your agent will advise you and your worker in writing about whether your worker is entitled to provisional payments.

What are provisional payments?

If your worker is entitled to provisional payments, this means that the worker can be reimbursed for reasonable treatment expenses relating to their mental injury while the claim is being assessed. If the claim is accepted, reasonable treatment costs for any accepted injuries will be payable in accordance with the workers' compensation legislation. If the claim is rejected, provisional payments will continue to be payable for 13 weeks. Other supports are also available to your worker, including return to work supports such as occupational rehabilitation, and community-based supports.

Where your worker has made a claim for a mental injury, they will be entitled to provisional payments unless they are not a Victorian worker, or unless the claim is a duplicate of a claim that has previously been made.

What you need to do if your worker is entitled to provisional payments:

- If your worker sends you invoices for medical and like services, advise your worker that these need to be provided to your WorkSafe agent.
- You are not required to pay the medical excess on a claim where a worker is entitled to provisional payments. This applies for the life of the claim, even if the claim includes a physical injury.
- Refer to worksafe.vic.gov.au/claims for further information.
- Continue to plan for your worker's return to work Please refer to section 7 of this guide, Helping injured workers return to work.
- · Forward any certificates of capacity to your WorkSafe agent.



You must start paying your injured worker on your usual pay days within 7 calendar days of your agent accepting the claim.

Your agent is responsible for assessing your worker's claim and determining liability. Decisions on liability must be made within certain timeframes determined by legislation. For most claims, this is 28 days.

If you believe a claim should be investigated, you should tell your agent and provide supporting information. Your agent may use an assessor to interview you and your worker about the circumstances of the claim. Your agent may also refer your worker to an independent medical examination.

Your agent may contact you to discuss the claim. They will advise you and your injured worker in writing whether liability is accepted.

Information on how agents make decisions can be found in the publication, *Introducing WorkSafe, A guide for injured workers*, available at **worksafe.vic.gov.au**.

Your role while your agent is assessing the claim

Regardless of who is responsible for the injury, you play an important role in supporting your injured worker's return to work. Ask yourself, your injured worker and your agent what you can do to help.

From the day you receive your injured worker's claim for weekly payments or a certificate of capacity, or your agent advises you that they have received these documents (whichever is earlier), you are required to start planning for their return to work.

Intervention at the right time is a key element in enabling your worker to return to work in a safe, timely and sustainable way. Early planning can also foster goodwill while you are waiting on a decision or a claim. Please refer to section 7 of this guide, *Helping injured workers return to work*.

Before the claim is accepted, there is no obligation for you to make weekly payments. If you do make weekly payments to your injured worker, it is not confirmation that the claim is accepted.

If the claim is accepted, any weekly payments you have made will contribute to meeting your employer excess.

You may choose not to pay weekly payments and/or medical and like expenses until your agent has determined liability on the claim. For claims including a mental injury, if the worker is entitled to provisional payments then mental injury treatment expenses will be payable – your worker should send any invoices/receipts directly to your agent for payment.

If your injured worker is not entitled to sick leave, they can apply to Centrelink for sickness benefits. In this case, you should provide your injured worker with a letter confirming that liability on the claim has not yet been determined.

A worker can still receive provisional payments for a rejected mental injury if they are entitled to provisional payments.

If your agent accepts the claim

Your agent will let you know in writing that the claim is accepted and provide other important information, including the amount of the weekly payments (if applicable) payable to your worker.

If you disagree with your agent's decision, there are a number of ways to address your dispute. Refer to section 8 of this guide, *Frequently Asked Questions*.

Assessing the claim

If your agent rejects the claim

If the claim is rejected, you don't have to pay any weekly payments or medical and like expenses. Your injured worker has 60 days to appeal the decision by lodging a referral to the Workplace Injury Commission (WIC). At any time, your injured worker can request a review by a senior review officer at your agent. If a review or a referral to WIC is received, your agent will contact you to discuss it.

Your return to work obligations commence before your agent accepts or rejects a claim. This is because of the importance of early intervention in return to work. Please refer to section 7 of this guide for more information about the commencement of your return to work obligations.

If the claim is rejected by your agent, you are not required to continue to meet the return to work obligations unless there is a subsequent conciliation or court outcome that overturns that decision. You are still encouraged to continue return to work related activities during the period that a rejected claim is being disputed. This can assist with your worker's rehabilitation and also benefits you as an employer by reducing training or recruitment costs.

Additionally, for rejected mental injury claims, if your worker is entitled to provisional payments:

- the agent can continue to pay for your worker's reasonable mental injury treatment costs for up to 13 weeks even after the claim is rejected
- you should advise your worker to continue sending invoices or receipts for mental injury treatment to your agent for payment
- return to work supports and community-based supports are also available to your worker.

Refer to **worksafe.vic.gov.au/claims** for further information.

What you should do next

If the claim for weekly payments is accepted, you must start paying your injured worker on your usual pay days within 7 calendar days of your agent accepting the claim. Unless your agent notifies you otherwise, you must continue to make weekly payments to your injured worker for as long as you receive valid certificates of capacity. You must do this even if the worker has resigned or you have not received your reimbursement. You are obliged to pay your injured worker, even if they have left your workplace.

Your agent will reimburse you for weekly payments and any medical and like expenses over your employer excess within 30 calendar days of receiving the certificates of capacity or your accounts/receipts.

To be eligible, you must apply for reimbursement for weekly payments within 3 months of making the payments.

Note that where the worker is entitled to provisional payments for a mental injury claim, no medical and like excess is payable by you for the life of the claim. Your worker should send all treatment receipts and invoices directly to your agent for payment.

Information collected by WorkSafe and your agent is used, disclosed and stored in accordance with Victorian privacy laws.

Assessing the claim

Employer excess

An excess applies to all WorkSafe claims.

Physical injury only claims

If your agent accepts your worker's claim for weekly payments and/or medical and like expenses, you are required to pay the first 10 working days of weekly payments. You must also pay medical and like services up to the excess amount.

Send copies of your receipts to your agent so they have a record of what you have paid towards your excess.

The maximum amount payable for medical and like expenses is indexed annually. For current rates, call your agent, go to **worksafe.vic.gov.au** or contact WorkSafe Advisory on 1800 136 089 or (03) 9641 1444.

Claims including a mental injury

If your agent accepts your worker's claim for weekly payments and/or medical and like expenses, you are required to pay the first 10 working days of weekly payments.

However, **no medical and like excess** is payable for the life of the claim where the worker is entitled to provisional payments for a mental injury claim. If you have already made payment on behalf of your worker for mental injury treatment costs, you can ask your agent for a reimbursement.

Advise your worker that any treatment invoices/receipts need to be sent directly to your agent for payment.

Excess buy-out option

If you don't want to pay an excess on your claim, you can take the excess buy-out option when you register or renew your WorkCover insurance. This option will cost you an extra 10 per cent of your premium. For more information on the excess buy-out option, contact your agent.

Collection of information

When your worker makes a WorkCover claim, WorkSafe or your agent may collect personal and health information about your injured worker. Information may be collected from you, previous employers, other government agencies, credit reporting agencies, health service providers, lawyers, investigators, loss adjustors and others who can provide information relevant to the claim.

Information collected by WorkSafe and your agent is used, disclosed and stored in accordance with relevant privacy laws. Your injured worker can request access to personal and health information collected in the course of managing the claim.

Need help?

For help with managing a claim, contact your agent or contact WorkSafe Advisory on 1800 136 089 or (03) 9641 1444.



Claims for weekly payments

Weekly payments

Injured workers are entitled to weekly payments if they are unable to perform their pre-injury duties or lose income because of a work-related injury or illness. Weekly payments are based on your injured worker's pre-injury average weekly earnings (PIAWE), capped at a maximum rate and indexed annually.

PIAWE is calculated based on your worker's average weekly earnings for the 52 weeks before their injury. If you employed your worker for less than 52 weeks, in most cases their average weekly earnings are based on the period of their employment with you. Periods of unpaid leave and periods not worked are excluded from the calculation of PIAWE.

PIAWE is based on ordinary earnings for the normal number of hours worked per week. PIAWE may include the following:

- · base rate of pay
- overtime and shift allowances (for the first 52 weeks only)
- piece rates (payments based on the output of worker)
- · commissions
- the monetary value of certain non-pecuniary (non-cash) benefits
- the value of any part of salary that the worker requested you to direct to another party - commonly referred to as a salary sacrifice.

Items such as incentive based payments or bonuses, loadings, monetary allowances and any other separately identifiable amounts are excluded.

Overtime or shift allowances may be included in the calculation of PIAWE for the first 52 weeks of weekly payments, subject to some conditions.

If your worker receives a non-pecuniary (non-cash) benefit, this may be included in their PIAWE. These benefits may include residential accommodation, a motor vehicle, private health insurance or education fees. Similarly if your worker has entered into a salary sacrifice arrangement, this may also be included in their PIAWE.

The amount of weekly payments will depend on:

- vour worker's PIAWE
- · your worker's current work capacity
- how long your worker has received weekly payments
- whether your worker has earnings from remaining at or returning to work

If your worker is an apprentice or trainee, you should let your agent know as this can also affect their weekly payments.

The weekly payment rates listed below are effective from 5 April 2010.

Your WorkSafe agent will assist you to accurately calculate your worker's PIAWE and let you know if these items are included in the calculation of your worker's weekly payments. A form to assist you to record the information needed to calculate a worker's PIAWE, Calculating Pre-Injury Average Weekly Earnings, is available at worksafe.vic.gov.au

Claims for weekly payments

Weekly payment rates

| | Worker has returned to work (and is earning less than their PIAWE) | Worker has not returned to work |
|------------------------|--|--|
| For the first 13 weeks | 95% of PIAWE (capped at a maximum rate) less what they currently earn a week. | 95% of PIAWE (capped at a maximum rate). |
| 14 weeks to 130 weeks | 80% of PIAWE (capped at a maximum rate) less 80% of what they currently earn a week. | 80% of PIAWE (capped at a maximum rate). |
| After 52 weeks | As above. Additionally, entitlement to | As above. Additionally, entitlement to |
| | superannuation contributions starts, subject to criteria. | superannuation contributions starts, subject to criteria. |
| | For more information visit worksafe.vic.gov.au | For more information visit worksafe.vic.gov.au |
| After 130 weeks | Weekly payments cease after 130 weeks. If your injured worker has returned to work at least 15 hours a week (minimum earnings apply) and continues to be indefinitely incapable of earning more in any job as a result of their injury or illness indefinitely, they can apply for their weekly payments to continue beyond 130 weeks. If your injured worker meets both these conditions, their weekly payments will be calculated at 80% of PIAWE (capped at a maximum rate), less 80% of what they currently earn a week. | Weekly payments cease unless: your injured worker continues to have no capacity for suitable alternative work and this is not likely to change; and your worker's whole person impairment (WPI) has been assessed as 21% or more (for claims reaching 130 weeks on or after 31 March 2024). 80% of PIAWE (capped at a maximum rate). Payments can continue until either the earlier of: a change in your injured worker's capacity your injured worker reaching retirement age. |

Maximum rates apply to all weekly payments. These rates are indexed on an annual basis. For current rates, visit **worksafe.vic.gov.au**, contact your agent or WorkSafe Advisory by phone on 1800 136 089 or (03) 9641 1444.

Your injured worker may be entitled to additional or 'top-up' pay through an award or enterprise bargaining agreement. For more information, contact your employer association, union or the FairWork infoline on 13 13 94.



Supporting your injured worker to return to safe and sustainable work as soon as possible is necessary to meet your legal obligations. It also helps your worker and is good for business. It can increase productivity and keep the cost of your WorkSafe insurance premium down. It benefits your worker by reducing the financial, health and emotional impacts on them and their family.

A workplace injury resulting in a claim for compensation can impact on an employer's premiums in the year after the injury and over the following 3 years. As long as there are ongoing costs associated with a claim during this time, there can be an impact on your premium. For this reason, safe and sustainable return to work benefits your organisation in the short term as well as the long term.

Your return to work obligations



plan for your worker's return to work:

- obtain relevant information about your worker's capacity for work
- consider reasonable workplace support, aids or modifications to assist in your worker's return to work
- assess and propose options for suitable or pre-injury employment to your worker
- provide your worker with clear, accurate and current details of their return to work arrangements, and
- monitor your worker's progress
- consult directly with your worker about their return to work, with their treating health practitioner (subject to the consent of the worker) and occupational rehabilitation provider (if involved)
- for a period of 52 weeks, provide your injured worker with suitable employment if they have an incapacity for work and/or pre-injury or equivalent when they have returned to full capacity
- appoint a return to work coordinator who has an appropriate level of seniority and is competent to assist you meet your return to work obligations
- make information about return to work available to all workers
- if a host, cooperate with the labour hire employer's efforts to meet their return to work obligations and facilitate the worker's return to work

These obligations are explained in more detail on the following pages. For additional information on how to comply with these obligations refer to the WorkSafe Return to Work Compliance Codes:

- Compliance Code 1 of 4: Providing employment, planning and consulting about return to work
- Compliance Code 2 of 4: Return to Work Coordinators
- Compliance Code 3 of 4: Return to work information
- Compliance Code 4 of 4: Cooperating with labour hire employers about return to work

Your approach to return to work can be tailored to your organisation and should accommodate your worker's individual circumstances.

Return to work obligations: labour hire

Hosts that engage workers through labour hire employers also have a return to work obligation. If a worker is injured while working at a host's workplace, the host must, to the extent that it is reasonable to do so, cooperate with the labour hire employer's efforts to meet their return to work obligations and facilitate the worker's return to work. For detailed information about this obligation, refer to WorkSafe's Compliance Code 4 of 4: Cooperating with labour hire employers about return to work and the fact sheet Labour Hire and Return to Work.

When return to work obligations start

Your return to work obligations start even before the claim has been accepted by your WorkSafe agent. They commence when you receive your injured worker's certificate of capacity or claim for weekly payments, whichever is earlier, or from the date your WorkSafe agent advises you that they have received these documents.

Experience shows that helping a worker return to safe work sooner - even if it's on reduced hours and modified or alternative duties - can achieve a better outcome in the long term.

Offer early support to your worker and keep them informed and connected to the workplace. Take care not to place pressure on your worker to return to work too early, and be guided by information received from the treating health practitioner.

What if your worker's claim is rejected?

It is beneficial to continue to meet your return to work obligation during a period that a rejected claim is being disputed. This ensures continuity and can assist your worker's rehabilitation and return to work. Also, the time that you continued to provide suitable or pre-injury employment is counted towards the fulfilment of your obligation to provide suitable and pre-injury employment for the 52 week employment obligation period should the claim be accepted.

Penalties

WorkSafe actively monitors and enforces compliance with the legislation. A Return to Work Inspector may visit your workplace to assess whether you are complying with your return to work obligations. Inspectors will help ensure you are appropriately informed. If appropriate, they will issue an improvement notice requiring you to comply with your obligations.

For more information about Return to Work Inspectors refer to:

- WorkSafe's fact sheet Return to Work Inspectors
- worksafe.vic.gov.au.

Employers who breach their return to work obligations also risk prosecution and financial penalties of up to 180 penalty units for a natural person and up to 900 penalty units for a body corporate per offence. For information about the value of penalty units, refer to worksafe.vic.gov.au.

Your worker's return to work obligations

Workers also have return to work obligations. These are to:

- make reasonable efforts to return to work with their employer or, if necessary, another employer
- make reasonable efforts to actively participate and cooperate in planning for return to work
- actively use an occupational rehabilitation service, if provided, and cooperate with the provider of that service
- actively participate and cooperate in assessments of their capacity for work, rehabilitation progress or future employment prospects
- actively participate and cooperate in an interview for the purpose of enhancing their return to work opportunities, if requested to do so.

If an employer thinks their injured worker is not adequately meeting their return to work obligations or needs help, then they should contact their agent. If the agent determines the worker is not making a reasonable effort to meet their return to work obligations, the worker's weekly payments may be affected. In these circumstances, the agent will contact the worker.

What workers can expect

When a worker makes a claim for weekly payments they can expect:

- the choice of treating health practitioner
- the choice of an occupational rehabilitation provider from a list of a minimum of 3 providers (when an occupational rehabilitation service is offered)
- the option to be represented, assisted and supported (except by a legal practitioner) during any stage of the return to work process, including in the consultation process. However, this person cannot meet the worker's obligations for them
- suitable or pre-injury employment to be provided following a work-related injury
- maintenance of their confidential information, and
- the opportunity to have decisions regarding their claim reviewed.

Other requirements

In addition to your return to work obligations in Victoria, there are other State and Commonwealth laws that employers need to be aware of which apply to their workers. These are summarised below.

Occupational Health and Safety requirements

Employers have obligations under Victoria's OHS legislation to provide a safe work environment. Employers need to consider their obligations under OHS laws when planning a worker's return to work.

Privacy and confidentiality requirements

Victoria's workers' compensation laws, information privacy laws and health records laws regulate the exchange of personal and health information. Employers should be familiar with these requirements because they may have access to confidential information about their worker during the claims process and in managing their return to work.

Anti-discrimination and labour requirements

The legislation prohibits an employer or prospective employer from engaging in the following discriminatory conduct relating to a worker pursuing a claim for compensation or for notifying an employer or WorkSafe of an injury under the legislation:

- dismissing, or threatening to dismiss, a worker from employment, or
- altering, or threatening to alter, the position of a worker to the worker's detriment, or
- treating a worker less favourably than another worker in relation to promotion or re-employment.

There are also other State and Commonwealth discrimination laws that require employers to make reasonable adjustments to hours, equipment and conditions to accommodate a worker's injury or illness regardless of its cause, nature or permanency. These laws apply to all workers, whether full-time, part-time, temporary, permanent or casual. It may be unlawful to treat any worker less favourably at work because of their illness or injury or allow them to be treated less favourably by others.

In addition, employers need to comply with labour laws, industrial awards and agreements under which your employment arrangements are regulated. WorkSafe and its agents are not able to provide advice regarding these laws and requirements.

However, it is recommended that you become familiar with these and other relevant requirements.

Meeting your return to work obligations

Everyone's circumstances and experiences may differ, but supporting your worker by appropriately planning their return to work can help their rehabilitation and get them back to their normal life.

As the employer, your attitude, support and understanding following an injury will affect the relationship between your organisation and your injured worker. Maintaining appropriate contact with your worker is crucial in helping them while they recover and return to work.

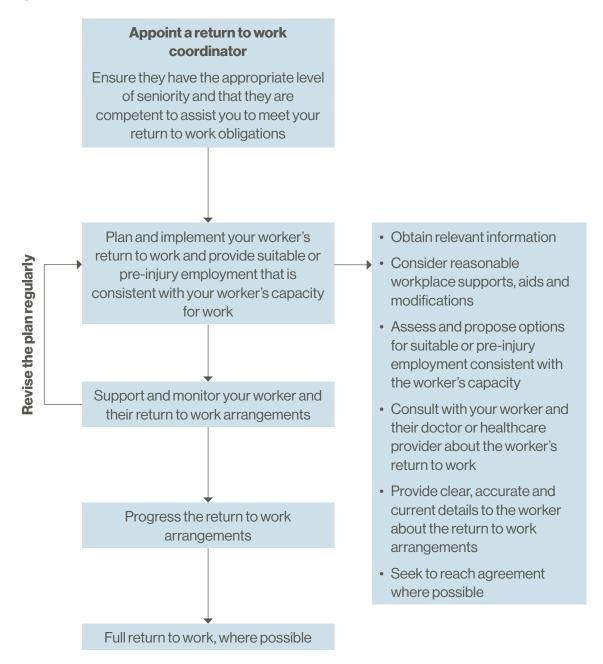
The following are some key actions you can take early in the process that will facilitate your worker's return to work:

- contact your worker to ask how they are and to offer support
- provide your worker with relevant return to work information
- let your worker know that your organisation takes health and safety seriously by letting them know what you are doing to address the hazards that led to their injury
- tell your worker who the Return to Work Coordinator is and that they should expect a call from them soon
- ensure your worker has received the brochure Introducing WorkSafe, A guide for injured workers.
 If they haven't been sent a brochure by your agent, copies can be found on the website worksafe.vic.gov.au
- be prepared to make appropriate workplace changes to accommodate your worker's return to work
- advise your other workers what you will do to support and assist them and their injured colleague during return to work and ask them to do what they can do to support their colleague
- visit worksafe.vic.gov.au/resources/returningwork-guide-injured-workers, which has helpful information for employers and workers about return to work.

It's important to understand that each of your return to work obligations stands alone. Even if it is not reasonable for you to provide suitable or pre-injury employment at a particular point in time during the employment obligation period, your other return to work obligations, such as return to work planning and consulting, continue to apply.

By continuing to plan for and consult about your worker's return to work, you will be in a position to assess new opportunities for suitable or pre-injury employment that may arise over time in your organisation. You will also need to be responsive to changes in your worker's capacity and you can propose appropriate options to support their return to work.

The return to work process



Seek help from your agent whenever needed throughout this process.

Suitable and pre-injury employment

- If your worker can remain at or return to their pre-injury work, you must provide work that is the same as, or equal to, the work performed before the injury (pre-injury employment).
- If your worker cannot do their normal duties and/ or hours, you must provide work that is currently suited to the worker's capacity for work, medical condition, age, skills and experience (suitable employment).

Suitable employment

Suitable employment means employment for which the worker is currently suited, having regard to:

- the nature of their incapacity and medical information (including the certificate of capacity)
- the nature of their pre-injury employment
- · their age, education, skills and work experience
- their place of residence
- · any plan or document prepared as part of the return to work planning process
- any occupational rehabilitation services involved.

Suitable employment could mean your worker does modified or alternative duties, or reduced hours while they recover. Try to provide suitable employment that is as close as possible to your worker's normal job. You could also make changes to the equipment or tools your worker would use to help them return to work.

Assessing and proposing options for suitable employment, based on your worker's likely recovery and anticipated capacity for work, needs to start early. The proposed duties should be informed by your consultation with your worker and their doctor or healthcare provider. See the Planning for your worker's return to work section on page 24 for more information.

Over time, suitable employment should be structured to accommodate an increase in duties and hours as your worker recovers.

When do I need to provide suitable or pre-injury employment?

If your injured worker has a current work capacity but cannot yet return to their full pre-injury duties and hours, you need to provide them with suitable employment that is consistent with their capacity. This obligation starts as soon as you receive your worker's certificate of capacity, claim for weekly payments or the date you are advised by your agent that they have received these documents, whichever is earlier.

When your worker is able to return to their normal duties, you must provide them with their pre-injury or equivalent employment.

This obligation continues for 52 weeks and is called the 'employment obligation period'. This may not be 52 consecutive weeks as it only takes into account those periods that your worker has an incapacity for work, that is, they cannot do their full pre-injury duties and hours as a result of their work-related injury.

Employers must meet this obligation to the extent it is reasonable to do so. In most circumstances, it is expected that it will be reasonable for employers to fulfil this obligation.

Pre-injury employment

Pre-injury employment is the job that is the same as or equal to the job that your worker was employed to do before they sustained the injury or illness.

The end of this obligation period does not mean that you can simply terminate your worker's employment. There are other employment and anti-discrimination laws that you must comply with in relation to a worker's employment arrangements. There may also be relevant industrial awards or agreements. Refer to Other requirements on page 20.

Occasionally, a worker's pre-injury job may no longer be available, although this is rare. In these circumstances, when providing employment that is equal to the worker's job prior to the injury, the employer should consider factors such as:

- task requirements
- pay rates
- · hours of work
- · rosters/shifts
- · job location
- level of responsibility
- · seniority
- · any other relevant factor.

What if your worker has no capacity for work?

If your worker has no capacity for work, you still have to plan for their return to work and continue to do so in anticipation of their recovery. You can contact your agent for guidance, support and assistance. Planning includes assessing and proposing suitable employment options for your worker's likely capacity for work. Review each new certificate of capacity. In particular, check for changes to your worker's capacity, restrictions and what they can do. Consult, to the extent that it is reasonable, with your worker, their treating health practitioner and occupational rehabilitation provider (if one is involved). It's important to maintain appropriate contact with your worker.

Your approach should take into consideration the nature of your worker's injury or illness.

What if you can't provide suitable or pre-injury employment?

In unusual circumstances, it may not be reasonable for an employer to provide suitable or pre-injury employment.

If an employer thinks they may not be able to provide suitable or pre-injury employment at any point in time during the employment obligation period, they will need to demonstrate why. At a minimum, WorkSafe will ask you to:

- demonstrate the return to work planning and consultation you have undertaken
- demonstrate that an adequate assessment of suitable or pre-injury employment options has been undertaken
- identify any other factors you consider impact your ability to provide suitable or pre-injury employment
- demonstrate any assistance that you have sought, for example, from your agent.

If you think you cannot provide your worker with suitable or pre-injury employment, you should contact your agent immediately for assistance.

Refer to Appendix B for further information on this topic.

For detailed information on how to comply with your obligation to provide suitable or pre-injury employment refer to WorkSafe's Return to Work Compliance Code 1 of 4: Providing employment, planning and consulting about return to work.

Appropriate early intervention can have a direct effect on your worker's successful return to work.

Planning for your worker's return to work

What does planning return to work involve?

Planning return to work involves working out how you can help your injured worker stay at work while they recover, or safely return to work as soon as possible.

Return to work planning should be undertaken collaboratively with your worker, their treating health practitioner and, if applicable, others such as your worker's supervisor or manager, an occupational rehabilitation provider and your worker's representative or support person. Planning also involves monitoring your worker's return to work.

The planning should be done in a way that suits your workplace and the individual circumstances. It is important that options and expectations are clearly communicated to all involved.

Your agent has an important role in supporting you and your worker in the return to work process. You need to keep them informed of the status of your return to work planning and your worker's return to work progress. Each time you revise your planning or there is a change to the return to work arrangements, advise your agent and send them any relevant documents. Keeping your agent informed about your worker's return to work progress is another way to help demonstrate compliance with your obligations.

Tools and templates available to help you with return to work planning include:

- Suitable employment for injured workers A step by step guide to assessing suitable employment options
- Return to Work Arrangements.

These can support effective return to work planning and create the basis for a common understanding of options and expectations of the key parties involved.

When should you plan your worker's return to work?

You must start planning for your worker's return to work as soon as you receive their certificate of capacity, or claim for weekly payments, or from the date you are advised by your agent that they have received these documents, whichever is earlier.

Planning commences when your worker has an incapacity for work. Planning is a continuous process. This ensures the return to work arrangements in place remain consistent with your worker's capacity for work.

How a worker is treated early on after their injury can affect the long-term situation. Appropriate early intervention can have a direct effect on the successful return to work of your worker. It has been shown that the earlier the worker begins the return to work process, the more successful it is likely to be.

Early intervention does not always mean getting the worker back to work early. It's about providing appropriate support to your worker as soon as possible after the injury and demonstrating a commitment to their return to work. This could involve, for example, contacting your worker to see how they are doing, helping them understand what to expect next and providing them with return to work information and information about their entitlements.

How to plan and implement return to work

Planning and implementing return to work needs to consider the worker's individual circumstances, and your approach can be tailored to your organisation.

Maintain a strong focus on supporting your worker's return to work and ensure clarity for everyone involved. Putting important return to work information and arrangements in writing is an easy way to achieve this.

Step 1: Obtain relevant information

Gather information from the certificate of capacity to help you understand your worker's injury, capacity and anticipated recovery, including:

- the nature of your worker's injury or illness
- the details of your worker's incapacity for work and what they are able to do
- when your worker is likely to return to work
- how long it will be before your worker can return to their pre-injury duties
- other factors that may have an impact on your worker's capacity (e.g. capacity to travel, side effects of medication etc), and

 the type and frequency of assistance needed to support recovery (e.g. scheduled dressing changes, physiotherapy etc).

Whenever appropriate, talk to your worker about what duties are available in your workplace and what they can do.

Talk to your worker's supervisor and other colleagues to identify the requirements of your worker's job and whether this can be changed to suit their injury and recovery.

Discuss options for suitable employment with your worker's treating health practitioner. Provide them with an outline of your worker's normal pre-injury duties and a summary of possible suitable employment available in your workplace. Include the duties and tasks involved, the skills needed and the relevant physical or psychological requirements. This makes it easier for them to assess your worker's ability to undertake the proposed suitable employment or hours. It also shows your commitment to early return to work.

Step 2: Consider reasonable workplace support, aids or modifications, and assess suitable employment options to enable your worker to return to work

Even if your worker cannot immediately do any work, you should plan their return to work based on their anticipated recovery and capacity for work. Proposed suitable or pre-injury employment options can then be considered by your worker and their doctor or healthcare provider. Offer early support and keep your worker informed and connected to the workplace.

A key part of planning your worker's return to work is identifying, assessing and proposing suitable and pre-injury employment. Drawing on the information gathered, consider whether you can modify your worker's normal job or what alternative duties they could do. Think about whether there are reasonable workplace supports, aids or modifications that could assist your worker to return to work; for example:

· using support tools or equipment to reduce the physical demands of the job

- modifying some of your worker's normal duties so they can safely perform them. For example, reduced hours, rest breaks, rotating tasks, adjusting tasks or responsibilities, hours or shifts
- other assistance such as a buddy system for particular tasks.

Often a combination of these approaches is needed to accommodate your worker's individual circumstances.

When considering suitable employment you must take into consideration:

- the nature of your worker's incapacity and the details provided in medical information
- the nature of your worker's pre-injury employment
- your worker's age, education, skills and work experience
- your worker's place of residence
- any plan or document prepared as part of the return to work planning process
- any occupational rehabilitation services provided.

When assessing and considering suitable employment options, it's not necessary for the suitable employment to be a detailed role in your organisation or available in the open market. For example, suitable employment may be a unique combination of tasks.

You need to consider increasing the hours or range of duties that your worker performs as they recover.

In some circumstances, suitable training or vocational re-education may be appropriate. Such options should be discussed with your agent.

Use the WorkSafe template Suitable employment for injured workers - A step by step guide to assessing suitable employment options.

Seek help whenever you need it during the return to work process

Don't hesitate to contact your agent if you need help gathering information or matching the medical advice with duties available in your workplace. They have specialist staff to guide you through the process.

If necessary, your agent can make a referral to an occupational rehabilitation provider. Occupational rehabilitation includes advice and services that focus on getting your worker back to work. The worker must be given a choice of 3 occupational rehabilitation providers if services are approved.

Step 3: Propose suitable employment

Once you or your Return to Work Coordinator have assessed the options and identified work you think is consistent with your worker's current or anticipated work capacity, you are ready to propose this to your worker and their treating health practitioner.

What you propose should take into account feedback and suggestions that you have received from your worker, their treating health practitioner (usually set out in the certificate of capacity) and an occupational rehabilitation provider, if involved. If your worker has had input to the suitable employment proposed and knows there is support in the workplace, it is more likely the treating health practitioner will be confident that your worker can be certified with a capacity for this work.

It is important that the proposal is clear and contains adequate information. This allows everyone involved to understand and consider whether the proposed work matches your worker's capacity. Often the easiest and clearest way to do this is in writing. This can greatly support communication with the treating health practitioner.

Give the proposal to your worker and their treating health practitioner for consideration and feedback.

Sometimes there may be a need to modify the proposal to match your worker's capacity for work. Your early consultation with the key parties will help minimise such adjustments.

Ideally, each party will endorse the proposal, but formal acceptance of what is proposed is not essential. What is essential is that the suitable employment proposed is consistent with your worker's capacity for work before it is implemented in the workplace.

Step 4: Implement return to work arrangements

To ensure there are clear expectations from the outset, you must provide your worker with clear, accurate and current details of the return to work arrangements. The return to work arrangements will depend on your worker's injury and workplace and may include but are not limited to:

- suitable or pre-injury employment being provided, including modified or alternative duties that accommodate restrictions identified in the certificates of capacity
- · any tasks or duties to be avoided
- any aids or modifications required
- the hours, days, work breaks, work location
- the name of the person the worker is to contact to discuss their return to work
- the name of the supervisor or manager (if different from the worker's usual supervisor or manager)
- a review date (reviews can occur earlier than this date, depending on the circumstances).

Employers have flexibility on how they communicate the return to work arrangements. In most instances, the information is best provided in a written format to avoid any confusion. This can also help you to demonstrate compliance with your return to work obligations.

Where an employer's suitable employment proposal contains the necessary details, this may be taken to be the return to work arrangements.

WorkSafe's template Return to Work Arrangements can help you document clear, accurate and current details of the return to work arrangements.

Ensure that the current return to work arrangements are provided to all other parties involved, such as your worker's supervisor or line manager and your worker's treating health practitioner.

Inform your agent of the return to work arrangements implemented and wherever possible send this to them in writing.

You are now ready to implement the arrangements and continue your crucial role of encouraging, supporting and monitoring your worker as they return to work.

Prepare your workplace for your worker's return to work and notify colleagues.

When implementing the return to work arrangements, you should prepare for your worker's return by making any changes necessary to your workplace to ensure that your worker and their colleagues will be safe and supported. Also, make sure all staff dealing with your worker are aware that they are coming back to work and of their important role in supporting their colleague through this process.

Support and monitor your worker

Your obligation to plan your injured worker's return to work includes monitoring and updating your planning and the return to work arrangements as appropriate.

Your support and encouragement is crucial to the return to work process.

Check how your worker is going

When your worker returns to work you should regularly check how they are going and if there are any problems that you can resolve to make their return to work successful. Ensure their supervisor keeps you informed of your worker's progress and that you are aware of when they are going for treatment and/or a medical review.

Remember, no one wants to be injured. A workplace injury can have an emotional impact on your worker and their family, colleagues and friends. Feeling nervous or worried before returning to work are natural emotions for your injured worker after having been off work for a period of time. Appropriate encouragement and support for your worker when they are initially returning to work is important.

Revise the arrangements regularly and be flexible

Planning return to work is an ongoing process. It needs to be regularly reviewed and the appropriate changes made. This includes reviewing and updating the return to work arrangements to ensure they remain consistent with your worker's capacity for work. You should be flexible to any changes needed, such as the inclusion of additional rest breaks in the early stages or extra modifications to work in line with your worker's condition.

You should informally review the return to work arrangements frequently; for example, on a weekly basis. This will ensure the arrangements are relevant to your worker and workplace and that any problems or concerns are resolved promptly. It is a good idea to do a formal review of the plan at least every 28 days or when your worker visits their doctor or healthcare provider.

Over time, you may have several versions of the return to work arrangements that accommodate your worker's changing capacity for work.

Every time you revise the return to work arrangements, send a copy to your agent or advise them accordingly.

Good communication with your injured worker from the outset is fundamental to achieving early, safe and sustainable return to work outcomes.

Encourage your worker to contact you or your Return to Work Coordinator whenever they need information, guidance or support. This will help the worker feel part of the team while recovering away from work and upon their return to work. It will also assist you in supporting, monitoring and progressing a successful return to work.

Take the time to make regular contact with your worker, enquire how they are going and offer your assistance. Staying connected with the workplace can help your worker stay positive about recovering and getting back to work. You can also keep them informed about what's happening by sending them work newsletters or updates. If they are able to attend meetings while they recover, invite them to meetings or involve them in training they would normally need to do.

For an example of an effective return to work refer to Appendix C.

Acknowledge that your worker is part of the team

Participating in the workplace is a valuable part of assisting your worker's rehabilitation and can have a huge impact on their emotional, social and physical wellbeing. Even if your worker is on limited hours or duties, it is important that you recognise the contribution they are making and ensure they feel part of the team.

Progress the return to work

Return to work is a gradual process

Return to work is usually a gradual process and may involve several stages, including increases to hours, duties or responsibilities, as your injured worker's condition improves. The pace of improvement will vary for each worker. You need to be responsive to the feedback you receive from your worker and their treating health practitioner.

Keep your agent informed of changes

Your WorkSafe agent may ask you to review your return to work plan if they receive medical reports or other information indicating a change in your worker's capacity for work. It is important you remain in contact with your agent and send them copies of revised return to work arrangements. This will enable them to assist in monitoring your worker's return to work and liaise with relevant healthcare providers.

To ensure prompt reimbursement throughout the claim, send your agent the following as soon as possible:

- certificates of capacity
- statements of current weekly earnings
- any treatment accounts
- proposed suitable employment options and any subsequent return to work arrangements that are implemented.

This process is not required in relation to self-insurers.

Provide ongoing support and encouragement

Workers may need ongoing medical or healthcare treatment, such as physiotherapy or psychology, even after they have returned to work. It is important you support this and do everything you can to let your worker know you are committed to their recovery and rehabilitation. Your support and encouragement is crucial to the return to work process.

Full return to work

Return to work planning is no longer required when your worker has full capacity for their pre-injury duties and hours and has returned to their pre-injury (or equal) employment. The obligation would, however, restart where your worker has a subsequent incapacity as a result of the same injury.

Most workers will eventually achieve a full return to work if this is actively encouraged by their employer, doctor and healthcare providers. It is your job to ensure the return to work process progresses, and your continued contact and consultation with your worker, their doctor or healthcare provider and your agent is crucial.

Obtaining a full clearance

The final step in the return to work process is to obtain a full clearance from your worker's healthcare provider. A certificate of capacity is used for this purpose. It is completed with a date when your worker is 'expected to be fit for full normal duties'. Once you receive this certificate, you can expect your worker to perform all normal duties and hours from the nominated date.

Let your agent know when your worker has a full clearance and returned to their pre-injury employment, including hours.

Your worker may have ongoing treatment after this date and you should continue to monitor this. If you have any concerns about the type, frequency or duration of treatment, you should speak to your agent.

Addressing return to work issues

Cooperation between the employer, your injured worker and other parties involved in return to work is important to its success.

If a return to work related issue arises in the workplace, a quick and effective resolution fosters trust and prevents it from becoming a return to work barrier. Regular and respectful informal communication and clarification is often the best way to avoid return to work issues arising. You and your worker must attempt to resolve the issue in accordance with your workplace's agreed procedure or, in the absence of this, the Return to Work Issues Resolution procedure in Ministerial Direction 1/2010.

WorkSafe's fact sheet Steps to Resolving Return to Work Issues contains further information about this.

For detailed information on how to comply with your obligation to plan a worker's return to work, refer to WorkSafe's Compliance Code 1 of 4: Providing employment, planning and consulting about return to work.

Consulting about your worker's return to work

You are required to consult, to a reasonable extent, with the following people during the return to work process:

- your worker (and the person chosen by the worker to represent, assist and support them, if someone is chosen)
- your worker's treating health practitioner (subject to the consent of your worker). Once the worker has signed the authority in the 'Worker's Injury Claim Form', this consent has been provided
- an occupational rehabilitation provider (where involved).

Consulting includes:

- sharing information about the worker's return to work
- providing a reasonable opportunity for the person being consulted to consider and express their views
- taking those views into account.

Make sure you properly consider the responses and input provided to you during consultation. This allows the key people involved to contribute to the return to work process and supports you in adequately planning return to work and providing suitable or pre-injury employment. Although agreement between you and your worker is not essential, you should aim to reach agreement where possible as this assists successful return to work.

Depending on what is being addressed, consultation may occur during a discussion. However, more time may be needed for the person you are consulting with to consider and express their views. You will need to assess what is reasonable in the circumstances, taking into account the views of the other key parties about what is reasonable. You are expected to take appropriate measures when you consult.

Consultation is ongoing and would normally occur when you are:

- obtaining information about your worker's capacity for work
- considering reasonable workplace supports, aids or modifications to assist in your worker's return to work
- assessing and proposing options for suitable employment or pre-injury employment
- monitoring you worker's return to work to ensure that the return to work arrangements are most appropriate and progress over time, consistent with your worker's capacity for work
- considering any new information or changed circumstances.

Things to consider when consulting with your worker

It's important to always think about your worker's circumstances to ensure you consult appropriately. Consider whether to call your worker to stay in touch or invite them to the workplace as a genuine sign of support.

Some key factors that will influence your approach include the nature and severity of your worker's injury and whether there are any communication considerations, such as language.

Take care not to place pressure on your worker to return to work too early, while still offering early support and keeping them informed and connected to the workplace.

You need to consult with your worker directly, to a reasonable extent. Your worker is also entitled to representation, assistance and support at any stage of their return to work process, including in the consultation process. The worker may choose anyone (except a legal practitioner) to perform this function. If the worker has chosen someone to represent, support and assist them, you should liaise with this person throughout the return to work process. However, this person cannot meet the worker's obligations for them.

Things to consider when consulting with your worker's treating doctor or healthcare provider

You must consult with your worker's treating health practitioner, to a reasonable extent. It's important to understand that the best way to consult and the extent to which it is reasonable to so will depend on the circumstances.

Relevant factors influencing consultation include the medical information available to you (including on the certificate of capacity), whether this information needs to be clarified and the treating health practitioner's availability. Talk to your agent, as they can help you contact the treating health practitioner or provide you with further guidance.

Consultation with the doctor or healthcare provider can be done in a variety of ways. How you communicate needs to be appropriate for the circumstances and be as efficient as possible. It could include one or more of the following:

- providing and receiving information from your worker
- · providing and receiving information from your agent
- providing and receiving information from an occupational rehabilitation provider
- using the information provided on the worker's certificate of capacity
- making contact directly through a letter, questionnaire, email or fax, or telephone conversations.

Your worker's treating health practitioner may be reluctant to provide you with information unless they have your worker's written consent. When your worker signs the authority in the 'Worker's Injury Claim Form', they authorise the treating health practitioner (and others) to release information about the injury to the employer and WorkSafe. If the claim form has not been signed, then written consent from your worker must be obtained to access and use this information.

It should be noted that treating health practitioners do not have formal obligations to consult under the legislation.

Additional things to consider

You will have access to confidential information about vour worker. It's important to ensure your worker's privacy is maintained during this process and that only information essential to assist with return to work planning is communicated. Personal information must not be distributed more broadly than necessary. For example, your worker's supervisor will need information about their duties, restrictions and breaks. They should not need additional details such as medical information relating to the injury.

When dealing with this information you should:

- keep your worker's records in a secure place
- · only communicate information essential to assist with your worker's return to work
 - personal information must not be collected and/or distributed more broadly than necessary, and
- use information collected from or about your worker only for the purpose for which it was collected.

Your return to work coordinator's role is to assist you to meet your return to work obligations. They are also key in helping your injured workers remain at or return to work.

Appoint a return to work coordinator

Your return to work coordinator should liaise with all parties involved to monitor the progress of your worker's recovery and return to work. This ensures that return to work activities are undertaken in a safe, timely and effective manner. They should interact with your worker in a supportive and effective way, maintaining a good relationship and managing the return to work process.

Your return to work coordinator could be you or another suitable person in your organisation.

An employer's obligation to nominate and appoint a return to work coordinator depends on their rateable remuneration:

• Employers with rateable remuneration of \$2 million or more* must have a return to work coordinator appointed at all times.

 Employers with rateable remuneration of less than \$2 million* must appoint a return to work coordinator for the duration of the employer's return to work obligations to an injured worker.

*The \$2 million refers to all workplaces in the previous premium period. This amount is indexed annually. For the current excess, call your agent, go to worksafe.vic.gov.au or call WorkSafe Advisory on (03) 9641 1444 or 1800 136 089.

Return to work coordinator seniority and competencies

In order for Return to Work Coordinators to perform their role, they require an appropriate level of seniority and must be competent to assist the employer to meet their return to work obligations. Seniority is often a term used to describe an individual's position or length of service in the workplace compared with other staff. For a return to work coordinator, however, seniority means that they are empowered to speak on behalf of, and make decisions for the employer.

The employer should ensure that the return to work coordinator has sufficient seniority to assist the employer to do the following:

- plan the return to work and make return to work related decisions to progress an injured worker's return to work
- identify and propose suitable or pre-injury employment
- consult with the parties involved in the return to work, being the injured worker, the injured worker's treating health practitioner (subject to the consent of the worker) and occupational rehabilitation provider (where involved)
- act as a point of contact for a WorkSafe Return to Work Inspector, if requested to do so by the employer
- deal with any of the Return to Work Inspector's requests
- liaise with any other people as required about return to work matters including those within the organisation such as managers and supervisors, and
- participate in the resolution of return to work issues.

Ideally, the employer would publicise the role and seniority of the Return to Work Coordinator within their workplace.

For more information about return to work coordinators, refer to:

- WorkSafe's fact sheet Return to Work Coordinators
- Compliance Code 2 of 4: Return to Work Coordinators
- · worksafe.vic.gov.au
- · WorkSafe Advisory on 1800 136 089 or (03) 9641 1444.

WorkSafe considers that a return to work coordinator is competent if they have the knowledge, skills or experience in order for them to perform their role. The required knowledge, skills or experience include:

- knowledge of the employer's return to work obligations under the legislation including the employer's obligation to provide the worker with pre-injury or suitable employment for the duration of the employer obligation period to a reasonable extent.
- · an understanding of the role of the return to work coordinator
- · an understanding of the steps that employers should take following a work-related injury
- · an understanding of the rights and obligations of injured workers
- an understanding of how to plan a worker's return to work, including the steps required to provide pre-injury or suitable employment
- an understanding of which people the employer is required to consult with during the return to work process and the steps involved in this consultation process
- · an ability to communicate with the diverse range of people involved in the return to work process
- knowledge of where support, information and guidance is available and an ability to seek this assistance and guidance when appropriate
- an understanding of the importance of maintaining the confidentiality of the worker's private information in accordance with the legislation and applicable privacy legislation and how to do this

- an understanding of the procedure to be used by the workplace (agreed or specified by Ministerial Direction) when resolving a return to work issue
- an understanding of the functions of the return to work inspectorate and their role in enforcing compliance with the legislation
- knowledge of the Victorian workers' compensation scheme, and
- knowledge of the functions of WorkSafe in relation to return to work.

Ideally, these competencies would be reflected in the return to work coordinator's position description.

How can I help my return to work coordinator perform their role?

Return to work coordinators need your support to perform their role effectively. Encourage your return to work coordinator to access a combination of the following WorkSafe resources:

- Return to work coordination The basics you need to know
- 2-day training Role of a Return to Work Coordinator
- Return to Work Coordinator Register to keep up to date with latest developments, publications and tools
- newsletter for return to work coordinators, Learn to Return, with news, ideas and practical tips
- employer Return to Work Networks that enable return to work coordinators to share knowledge and experiences
- videos and fact sheets about return to work at worksafe.vic.gov.au/return-work-coordinatorreturn-work-roles

Make return to work information available to your workers

A workplace culture that promotes early, safe and sustainable return to work is a first step in supporting an injured worker to return to work. It's important that all workers, not only those who have experienced a workplace injury, have access to relevant return to work information.

In addition to displaying the WorkSafe If you are injured poster, you must make the following return to work information available to your workers:

- · your return to work obligations and how you are meeting these
- workers' return to work rights and obligations and how they can get further information about these
- · the name and contact details of your agent
- the name and contact details of your return to work coordinator (if applicable)
- the procedure for resolving return to work issues in your workplace.

As well as making it available to your workforce, you should also provide your worker with all of this information as soon as you know they are injured. This is the time when it will be most useful to them.

You must consult with your workers about how this information will be made available. Each organisation is different in structure, workforce and type of work. It's important you consult with your workers about what will work best. For example, discuss whether the information will be displayed in writing, placed in prominent locations within the workplace, distributed via a workplace newsletter and/or discussed at a staff meeting.

For detailed information on how to comply with this obligation, refer to WorkSafe's Compliance Code 3 of 4: Return to work information.



Who can help you with safety at work?

For more information about workplace health and safety, refer to **worksafe.vic.gov.au**, call WorkSafe Advisory on 1800 136 089 or (03) 9641 1444 or contact your industry group.

What should you do if you disagree with a claim decision?

If you disagree with a decision on your worker's claim, there are a number of ways to address your dispute:

- talk to your agent
- contact WorkSafe Advisory by email at info@worksafe.vic.gov.au or by phone on 1800 136 089 or (03) 9641 1444
- · contact your industry group.

An agent's decision to accept a claim can be reviewed on certain grounds. Contact WorkSafe Advisory for more information about disputing a claim.

Where to make a complaint

If you have a complaint about the service or management of your worker's claim, there are a number of ways to be heard. Contact your agent, WorkSafe, the Victorian Ombudsman or your industry group.

For more information about the complaints process, visit worksafe.vic.gov.au/make-complaint or contact WorkSafe Advisory by phone on 1800 136 089 or (03) 9641 1444.



Appendix A: What WorkSafe can pay

Your injured worker's doctor and healthcare providers are primarily responsible for identifying medical and like services that are appropriate for your worker's injury. The medical and like services your worker may be entitled to include:

- medical treatment
- medical imaging such as CT scans and x-rays
- physiotherapy
- ambulance
- · occupational rehabilitation
- hospital services
- nursing
- · chiropractic services
- · osteopathy
- pharmacy
- transport to and from treatment
- psychology and psychiatry
- personal and household help.

Contact your agent for more information about the fee schedules for these services. Some of the medical and like services your worker is not entitled to are:

- treatment or services not related to their work-related injury or illness (however note that treatment for a claimed mental injury can be payable if a worker is entitled to provisional payments – see page 12)
- treatment or services provided outside Australia, unless they obtain approval from your agent in advance
- treatment or services that are not clinically justified for their injury or illness
- treatment that is considered experimental or not covered by the Medical Benefits Scheme

 treatment from a person who isn't appropriately registered, qualified or authorised by WorkSafe to provide the service.

For more detailed information about medical and like services, go to **worksafe.vic.gov.au**.

How are services paid?

WorkSafe prefers healthcare providers to invoice you or your agent directly once your excess is met. Your injured worker needs to make sure the healthcare provider has the correct WorkSafe claim number so they can include this on their invoice.

If your worker does pay for their own treatment or services, they should send the original invoice and receipt to you, unless arrangements were made to send them directly to your agent, or unless your worker is entitled to provisional payments for a mental injury claim. In this case you don't need to pay a medical excess and the worker should provide invoices directly to your agent for payment.

Your injured worker should send invoices and receipts to you or your agent as soon as possible or at least within 6 months from the date of the treatment or service. Your worker should keep copies of all accounts and receipts for their own records and will usually be reimbursed within 30 calendar days.

Appendices

Appendix B: Providing pre-injury or suitable employment 'to the extent that it is reasonable to do so'

Workers injured at work have a right to be supported in their rehabilitation and given time to return to their pre-injury role. There is a clear expectation that all employers and workers take the appropriate actions to meet their return to work obligations.

Employers are required to meet their obligation to provide pre-injury or suitable employment to a reasonable extent. In most circumstances, it will be reasonable for employers to provide pre-injury or suitable employment that is appropriate to a worker's capacity for work.

The law recognises there may be circumstances where an employer is not able to provide pre-injury or suitable employment. While unusual, this may be relevant at a particular point in time or for the period of the obligation.

If you think you may be unable to provide employment consistent with a worker's capacity for work during your obligation period, it's important you have considered all necessary factors.

Ensure you have undertaken the appropriate planning and consultation to be able to assess options for suitable or pre-injury employment.

If you cannot provide suitable or pre-injury employment that is consistent with the worker's capacity for work, consider whether any of the below are limiting factors, such as:

- size, nature or range of work activities and structure of the employer's organisation, to ascertain if appropriate duties exist
- availability of information about the injured worker's capacity
- estimated cost of compliance and the financial impact on the employer, and
- impact of meeting the employer's obligations to any other worker.

Employers that consider they are not able to provide employment on the basis of such factors must be able to explain why. This would form the basis of further review by WorkSafe as to whether:

- the employer is adequately meeting this obligation
- · further enforcement action is necessary.

It will be useful for an employer to keep relevant written records and documentation as evidence why they are not able to provide suitable or pre-injury employment at any given point during the employment obligation period.

Appendix C: Example of an effective return to work

This example shows how good return to work practices can benefit both the injured worker and the employer.

Mike is a 42-year-old storeman and forklift driver who works for a packaging and distribution company.

During the hectic Christmas period, Mike feels a sharp pain in his back as he reaches down for a box on the conveyor belt. The pain is so intense it stops him from bending further and gets worse when he tries to sit down.

He reports the incident to his supervisor, who records the incident in the Register of Injuries book, sends him home early to rest and suggests he see a doctor the next day if he is not better. Mike's supervisor also informs Theo, the company's Return to Work Coordinator.

Mike sees his doctor, who diagnoses a low back strain and provides him with a certificate of capacity stating that he needs 10 days off work. She refers him to a physiotherapist for treatment and a program of exercises to improve his strength and flexibility.

During this time, Theo calls Mike to ask how he is feeling and offer support. He also sends Mike a 'Worker's Injury Claim Form' and helps him complete it.

Appendices

Theo starts to plan for Mike's return to work. He talks to his agent, reviews the information contained in Mike's certificate of capacity and talks to Mike about what he thinks he may be able to do. Theo then lists possible duties Mike could do in the foreseeable future in WorkSafe's template Return to Work Arrangements and discusses this with Mike's foreman. He sends the proposed duties to Mike, the doctor and the physiotherapist. Theo also sends Mike a copy of the brochure Introducing WorkSafe, A guide for injured workers to provide Mike with information about making a claim and his entitlements.

Mike attends a number of physiotherapy sessions, takes pain medication and rests as much as he can. His pain improves a little, but he still has difficulty bending forward and can only sit for about 20 minutes at a time.

He attends a second appointment with his doctor and receives a certificate for a further 2 weeks off work and a recommendation to continue with the treatment, stay active and walk as much as he can.

Theo calls the doctor to discuss the suitable employment options and sends her a brief email listing the tasks Mike normally does and other duties he could do while recovering. Theo also meets with the foreman to modify the roster and workload to accommodate Mike's return to work in a restricted capacity. He keeps Mike's colleagues informed of his recovery, the action the company has taken to support his early return to work and encourages staff to keep in touch with Mike.

Mike makes steady progress and can now sit for longer periods without pain.

His doctor gives him a certificate stating he can return to work on reduced hours with restrictions on sitting and bending activities.

Theo updates the proposed suitable employment options clearly and accurately in the return to work arrangements based on this new information. He sends a copy of this to the doctor and drops off a copy to Mike on his way home. They agree on the best date for him to return to the workplace ¬when Mike's supervisor will be available to support his return and check that everything is progressing as planned.

A few days later, Mike returns to work and over the next 4 weeks, with Mike and his doctor's agreement, his duties and hours are gradually increased.

On one occasion, Mike experiences more pain after a new task is added to his workload. Theo modifies the return to work arrangements to cut back on Mike's work spent on this task. He also makes sure Mike can leave early on certain days to attend physiotherapy appointments. Mike keeps Theo informed of his progress and together they agree on activities and rest breaks.

After 8 weeks, Mike is able to return to his normal job and hours. Theo also makes permanent changes to the way work is organised around the conveyor belt to reduce the likelihood of another injury.

While the extra effort of managing Mike's WorkSafe claim seemed inconvenient at times, Theo and his employer knew that getting Mike back to work as soon as possible was best for Mike and for staff morale – it was also good for the company's bottom line.



Use this Guide and WorkSafe's practical return to work fact sheets, videos, tools and templates to help you provide suitable or pre-injury employment and plan return to work.

To get more information and assistance about returning your worker to work, talk to:

- · your WorkSafe agent
- WorkSafe Advisory
- your industry association representative.

WorkSafe Return to Work compliance codes

For detailed information on how to comply with your obligations, refer to WorkSafe's Return to Work Compliance Codes:

- Compliance Code 1 of 4: Providing employment, planning and consulting about return to work
- Compliance Code 2 of 4: Return to Work Coordinators
- Compliance Code 3 of 4: Return to work information
- Compliance Code 4 of 4: Cooperating with labour hire employers about return to work.

The codes are available on our website at worksafe.vic.gov.au.

WorkSafe Advisory

WorkSafe Advisory is a free service that:

- answers general occupational health and safety inquiries
- · advises workers on their WorkSafe rights, including health and safety and what to do if injured or ill
- advises employers about WorkSafe Insurance issues
- · explains return to work, rehabilitation rights and obligations
- helps to resolve worker and employer concerns

For more information, call WorkSafe Advisory on 1800 136 089 or visit worksafe.vic.gov.au

Visit

WorkSafe Victoria 1 Malop Street Geelong Victoria 3220

worksafe.vic.gov.au



| Term | Definition |
|---|--|
| Agent (authorised agent) (WorkSafe agent) | A person or organisation appointed under the legislation to manage your WorkCover insurance on behalf of WorkSafe. References to agents in this document are not relevant where the employer is a self-insurer. |
| Certificate of capacity | A certificate required under the legislation that certifies the worker's incapacity for work and whether the worker has a current or no current work capacity. |
| Current work capacity | In relation to a worker, means a present inability arising from an injury such that a worker is not able to return to his or her pre-injury employment, but is able to return to work in suitable employment. |
| Compliance Codes | Provide practical guidance in relation to obligations under the legislation. A compliance code is not mandatory. A person or entity that has an obligation under the legislation and complies with a compliance code will – to the extent that the compliance code deals with that obligation under the legislation – be considered to have complied with their obligations. |
| Host | A person or business that uses a worker's services through a labour hire employer the worker has a contract with. |
| Incapacity for work | Where an injured worker has either: |
| | no current work capacity – so they are not able to return to suitable or pre-injury employment, or |
| | • a current work capacity – so they are not able to return to pre-injury employment, but are able to return to suitable employment. |
| Injured worker | A worker who has sustained an injury or disease at work and is entitled to workers compensation under the legislation in respect of that injury or disease. |
| Labour hire employer | An employer who on-hires the services of a worker to another person or business (host). |
| Ministerial Directions | Set out the way in which an obligation under the legislation must be made or set out procedural or administrative matters to support the legislation. |
| No current work capacity | In relation to a worker, means a present inability arising from an injury where the worker is not able to return to work, either in the worker's pre-injury employment or in suitable employment. |

Explanation of terms

| Term | Definition |
|--------------------------------------|---|
| Occupational rehabilitation provider | A person approved by WorkSafe to provide occupational rehabilitation services under the legislation such as workplace and vocational assessments. |
| Pre-injury employment | Employment of a worker in a position which is the same as or equivalent to the position in which the worker was employed before receiving the injury. |
| Return to work coordinator | Person appointed by the employer for the purposes of assisting them to meet their return to work obligations under the legislation. |
| Return to work inspector | An officer or employee of WorkSafe who is appointed as an inspector under the legislation for the purposes of ensuring compliance with the legislation. |
| Self-insurer | An employer approved by WorkSafe to manage their own workers' compensation claims. |
| Suitable employment | Employment for which the worker is currently suited having regard to a number of factors, including: |
| | the nature of the worker's incapacity and the details provided in medical information, including, but not limited to, the certificate of capacity supplied by the worker |
| | the nature of the worker's pre-injury employment |
| | the worker's age, education, skills and work experience |
| | the worker's place of residence |
| | any plan or document prepared as part of the return to work planning process |
| | any occupational rehabilitation services that are being, or have been, provided to the worker – |
| | regardless of whether the work is available, and the work or the employment is of a type or nature that is generally available in the employment market. |
| Treating health | Treating healthcare practitioners issue certificates of capacity to the worker. |
| practitioner | This is either a medical practitioner who has issued a medical certificate referred to in the legislation or a registered physiotherapist, chiropractor or osteopath who has issued a certificate of capacity referred to in the legislation (not the initial medical certificate). |
| Worker | A person who is a worker within the meaning of the legislation. |
| Whole person impairment (WPI) | The degree of WPI as determined using the American Medical Association 'Guides to the Evaluation of Permanent Impairment' 4th Edition (AMA Guides) or other methods as provided in the legislation and Ministerial Guidelines. |

Explanation of terms

| Term | Definition |
|-----------------------|---|
| Worker representative | The worker is entitled to representation, assistance and support at any stage of the return to work process, including in the consultation process. The worker may choose anyone (except a legal practitioner) to perform this function. If the worker has chosen someone to represent, support and assist them, the employer should liaise with this person throughout the return to work process. However, this person cannot meet the worker's obligations for them. |
| Workers compensation | Legislation that governs the management of workers compensation matters in Victoria |
| WorkSafe Victoria | The organisation responsible for the regulation of health and safety and workers' compensation in Victorian workplaces. |





WorkSafe Victoria

WorkSafe Agents

Agent contact details are all available at **worksafe.vic.gov.au/agents**

Advisory service

Phone (03) 96411444
Toll-free 1800 136 089
Email info@worksafe.vic.gov.au

Head Office

1 Malop Street, Geelong VIC 3220
Phone (03) 9641 1555
Toll-free 1800 136 089
Website worksafe.vic.gov.au

For information about WorkSafe in your own language, call TIS National on 13 14 50.



