



Licensed Insurers and Self-Insurers:

GUIDELINES

for developing an

INJURY MANAGEMENT PROGRAM



Please note

This information is for guidance only and is not to be taken as an expression of the law. It should be read in conjunction with the *Workers Rehabilitation and Compensation Act 1988*, the *Workers Rehabilitation and Compensation Regulations 2001* and any other relevant legislation. Copies of the legislation can be purchased from Print Applied Technology: call (03) 6233 3289 or freecall 1800 030 940. It is also available on the Internet at www.thelaw.tas.gov.au

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INTRODUCTION

Injury Management is a co-ordinated and managed process. It consists of activities and procedures intended to facilitate recovery in order to achieve the best results for a timely, safe and durable return to work for injured workers.

An injury management program is a series of documented policies and procedures that detail how the insurer will operate in order to achieve a co-ordinated and integrated process for injury management.

Licensed insurers and self-insurers are to develop and maintain an injury management program. The injury management program must be approved by the WorkCover Tasmania Board (the Board) and, following approval, form part of the licence/permit conditions.

An injury management program must be:

- ▮ based on guidelines provided by the Board
- ▮ consistent with Tasmania's workers rehabilitation and compensation legislation and the principles of the Return to Work and Injury Management Model
- ▮ consistent with the occupational health and safety procedures of the workplace; they must reinforce the objective of the fullest possible recovery from work-related injury
- ▮ a streamlined, transparent process for managing workplace injuries and claims for workers compensation
- ▮ presented in a planned and organised manner
- ▮ clearly identifiable and readily accessible
- ▮ reviewed at defined intervals by management to ensure its continuing suitability and effectiveness in satisfying the organisation's needs
- ▮ appropriately authorised prior to issue
- ▮ audited by the Board/Insurer.

The following guidelines are to be used by insurers as a *guide only* to help develop injury management programs. They are to be read in conjunction with the Tasmanian Return to Work and Injury Management Model. It is anticipated that additional policies and procedures may be included to better reflect the nature and scale of the organisation.

The guidelines have been prepared to establish minimum standards for developing injury management programs. The Board reserves the right to request additional information as it determines necessary.

DEFINITION OF TERMS

System Requirements: Encapsulates the key elements of an injury management program.

System Guidelines: Associated system requirements that detail the methodology for performing injury management activities.

Please note:

System requirements and guidelines may not necessarily be presented in the form of a written document. However, evidence must be presented to demonstrate the existence of a system and its effective implementation.

System guidelines have been developed to address the injury management activities performed by both licensed insurers and self-insurers. Therefore, careful consideration is to be given when applying these guidelines to establish if all or individual system guidelines are relevant to the organisation.

System Requirements	System Guidelines	Explanation
1. Injury Management Policy	1.1 Statement of commitment and objectives 1.2 Statement of roles and responsibilities of all parties 1.3 Policy to be appropriate to nature and scale of organisation 1.4 Consistent with relevant injury management legislation 1.5 Policy to be reviewed regularly	<p>The policy should reflect the insurer's commitment to injury management and should form the basis upon which the injury management program is developed. The policy should be consistent with applicable legislation and guidelines and promote continuous improvement. The policy should address but not be limited to the following principles:</p> <ul style="list-style-type: none"> /// Should be easily understood, and capable of being implemented in the workplace /// Should be consistent with the rehabilitation policy of the workplace /// Should be developed in consultation with all parties /// Should be supplemented by adequate written procedures that are readily available, and that identify key support roles and responsibilities for implementing the policy /// Should be readily available in the employer's workplace where the workers can readily refer to it /// Should be consistent with the provisions of the <i>Workers Rehabilitation and Compensation Act 1988</i> and supporting legislation /// Should be reviewed regularly (annually).
2. Policy for the Management of Employer Injury Management Programs (LICENSED INSURERS ONLY)	<p>Procedures are to be established that define how the insurer will:</p> 2.1 Assist employers to develop injury management programs 2.2 Ensure employers operate within injury management programs 2.3 Manage the assessment and approval of injury management programs 2.4 Ensure employers educate and promote injury management programs 2.5 Ensure employers regularly review and maintain injury management programs	<p>Employers may choose to have an injury management program in place, in which case it should be consistent with the insurer's injury management program. The insurer must develop procedures that define its arrangements for dealing with policy holders who choose to implement their own injury management program. These procedures should identify how the insurer will co-ordinate and manage the process and should include but not be limited to:</p> <ul style="list-style-type: none"> /// Roles and responsibilities of key personnel /// How the insurer will communicate with employer's /// How the insurer will manage information transfer and document exchange /// How the insurer will monitor and review employer's injury management programs /// Review timeframes /// How the insurer will address employer non-conformance with the process.
3. Information Management	<p>Procedures are to be established that define how the insurer will:</p> 3.1 Ensure full disclosure of and access to information 3.2 Ensure accurate and consistent information 3.3 Ensure that information will be available in other languages when necessary 3.4 Promote available services 3.5 Ensure that information is regularly reviewed and modified 3.6 Ensure confidentiality is maintained 3.7 Manage requests for authorisation to access and change information	<p>Procedures should be developed that identify how information will be provided and managed. The focus should be on ensuring access to information and support in order for all parties to clearly understand their roles, rights and responsibilities at the level that is required and deemed appropriate, including provision of the information in a language and format that all employers and workers can understand.</p> <p>Responsibility for management of the information should be delegated to personnel with the appropriate level of authority to ensure that accurate and relevant information is available in a timely manner.</p> <p>A document control system should be established.</p>

System Requirements	System Guidelines	Explanation
4. Communication Management	<p>Procedures are to be established that define how the insurer will:</p> <p>4.1 Promote open and honest communication</p> <p>4.2 Manage contact points and formal channels of communication between all parties</p> <p>4.3 Ensure the timeliness of communication</p> <p>4.4 Ensure the correct application of both oral and written communication</p> <p>4.5 Ensure communication is clear and in 'plain English'</p> <p>4.6 Ensure communication is non-threatening</p> <p>4.7 Ensure interpreting services are made available when necessary</p>	<p>An effective injury management program relies upon the provision of timely and accurate information. All communication should be conducted in a non-threatening manner. Procedures should be developed that identify the mechanisms for communication, including how it will be both managed and facilitated. The procedures should include but not be limited to:</p> <ul style="list-style-type: none"> /// Identifying key contacts /// Specifying timeframes for establishing initial contact and ongoing contact /// Documenting recording requirements for all contacts /// Identifying methods for the provision of information including informing workers of all relevant organisational procedures relevant to the injury management and return to work processes /// Identifying and communicating the roles and responsibilities of all parties in the communication process /// Identifying an issue resolution process that sets out the means by which an injured worker can progress an issue or matter of concern /// Where appropriate, identifying the involvement of any external body if an issue cannot be resolved within the organisation /// Where an injured worker has difficulty understanding or reading English the information should be translated or directly explained to individuals in a language and format that can be clearly understood.
5. Role of the Injury Management Co-ordinator (IMC)	<p>Procedures are to be established that define how the insurer will:</p> <p>5.1 Manage the role, responsibilities and duties of an IMC (including quantity requirements)</p> <p>5.2 Manage the skill and knowledge requirements</p> <p>5.3 Ensure the identification and provision of training requirements</p> <p>5.4 Manage the appointment process</p>	<p>The role of the IMC is to co-ordinate and oversee the entire injury management process. The insurer should identify the number of IMCs based on the need of the organisation. The IMC should be provided with adequate resources to enable them to effectively carry out their duties which may include management of:</p> <ul style="list-style-type: none"> /// Contact, communication and management of the relationship between all parties /// All aspects of injury management and return to work /// Medical / specialist treatment and occupational rehabilitation /// Monitoring injured worker's progress /// Other functions specified by the insurer. <p>The insurer should have procedures in place that identify the IMC role within the injury management program. The key components of the IMC role should be formally identified, documented and communicated. Procedures may address but should not be limited to the following components:</p> <ul style="list-style-type: none"> /// Role Statement /// Responsibilities /// Obligations /// Authority to act /// Accountability /// Key performance indicators /// Minimum competency/training requirements.

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<p>6. Role of the Occupational Rehabilitation Provider (ORP)</p>	<p>Procedures are to be established that define how the insurer will:</p> <p>6.1 Manage the role, responsibilities and duties of an ORP</p> <p>6.2 Manage the skill and knowledge requirements</p> <p>6.3 Manage the selection process for external service providers</p> <p>6.4 Manage the referral process of an injured worker to an ORP</p> <p>6.5 Manage external service providers</p>	<p>An ORP provides medical rehabilitation and occupational rehabilitation services for injured workers and assists the worker in recovery and preparation for return to suitable employment. An ORP should be engaged to assist an injured worker based upon assessed needs identified by a treating medical practitioner or specialist. Referral to an ORP must be appropriate and timely and may include the provision of services such as:</p> <ul style="list-style-type: none"> /// Initial occupational rehabilitation assessment /// Occupational rehabilitation case management /// Preparation of Injury Management Plans and Return to Work Plans /// Workplace services including workplace assessment, job analysis and advice concerning job modification /// Work conditioning and functional education /// Occupational rehabilitation counselling including vocational counselling and adjustment to disability counselling /// Functional capacity assessment /// Vocational assessment /// Vocational placement including advice or assistance concerning job seeking, advice or assistance in obtaining vocational re-education or training and post placement support /// Rehabilitation co-ordination, basic case management and return to work planning for the workers of their employer /// Any other service as prescribed by the treating medical practitioner or specialist. <p>The insurer should have procedures in place that identify the ORP role within the injury management program. The key components of the ORP role should be formally identified, documented and communicated. Where external service providers are engaged the specific types of service and standards of service should be detailed in specifications. At relevant periods of time the services delivered should be reviewed for conformance with any agreements and specifications.</p>

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7. Role of the Return to Work Co-ordinator (RTWC) (SELF-INSURERS ONLY)	<p>Procedures are to be established that define how the insurer will:</p> <p>7.1 Manage the identification of a RTWC</p> <p>7.2 Co-ordinate the role, responsibilities and duties of a RTWC</p> <p>7.3 Suitably train RTWCs</p>	<p>The role of the RTWC is to facilitate and co-ordinate the injured worker's return to work within the workplace. The RTWC should be provided with adequate resources to enable them to effectively carry out their duties, which may include:</p> <ul style="list-style-type: none"> /// Aspects of return to work requirements at the workplace /// Assisting in the rehabilitation and return to work for injured workers, monitor progress, develop and review return to work plans and injury management plans /// Assisting in the identification of suitable alternative duties and if necessary alternative job placements or redeployment in the workplace /// Assisting in the communication and management of the relationship between all parties /// Other functions specified by the insurer. <p>The insurer should have procedures in place that identify the RTWC role within the injury management program. The key components of the RTWC role should be formally identified, documented and communicated.</p>
8. Mechanisms to Facilitate Early Reporting and Intervention of Injuries/Claims	<p>Procedures are to be established that define how the insurer will:</p> <p>8.1 Early Reporting</p> <ul style="list-style-type: none"> (i) Implement a variety of mechanisms to facilitate early reporting (ii) Manage timeframes for early reporting (iii) Manage employer training and educational requirements (iv) Administer any early reporting incentive scheme (v) Manage corrective action for late submissions <p>8.2 Early Intervention</p> <ul style="list-style-type: none"> (i) Manage key contact points with key parties (ii) Administer provisional payments 	<p>Employers should be encouraged to report all work-related injuries to the insurer that may lead to a claim for workers compensation. Early reporting and intervention will assist in the injury management and return to work process and enhance the likelihood of positive return to work outcomes. Procedures should be developed that include but are not limited to:</p> <ul style="list-style-type: none"> /// Advising employers of their obligations to record and report injuries /// Identifying the expected reporting timeframes /// Identifying key parties, roles, responsibilities and timeframes for establishing and maintaining contact /// Ensuring that information provided on the claim form is complete and accurate /// Identifying a process for managing late reporting, including advising employers of the consequences of failure to report within the specified timeframes /// Ensuring persons with responsibilities under the injury management program receive appropriate instruction/training to enable them to undertake the tasks they have been allocated.

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<p>9. Medical Management</p>	<p>Procedures are to be established that define how the insurer will:</p> <p>9.1 Medical Practitioners</p> <ul style="list-style-type: none"> (i) Monitor the timeliness of appointments for injured worker medical consultations and treatment (ii) Manage the provision of information including but not limited to: <ul style="list-style-type: none"> (a) facilitating notification of a change to the injured worker's medical practitioner and; (b) subsequent authorisation to release relevant medical records. (iii) Manage contact points between involved parties - in particular with the medical practitioner (iv) Ensure systems are in place for the management of medical certificates (v) Ensure systems are in place for the management of medical reports (vi) Manage the referral process to the Medical Advisory and Mentoring Service <p>9.2 Independent Medical Reviews</p> <ul style="list-style-type: none"> (i) Manage the process for seeking and undertaking reviews (ii) Manage consultation requirements – in particular with the medical practitioner (iii) Manage the provision of information including but not limited to: <ul style="list-style-type: none"> (a) Notifying the injured worker of the reasons for seeking a review (b) Provide copies of the review report to the IMC and the treating medical practitioner (iv) Manage contact points between involved parties (v) Facilitate audit of the use of independent medical reviews 	<p>The procedures should recognise the central role the medical practitioner plays in the injury management process. The medical practitioner usually should have ongoing contact with the injured worker throughout the injury management and return to work process and plays a key role in the communication between the injured worker, the employer and the insurer. Procedures should be developed that include but are not limited to:</p> <ul style="list-style-type: none"> /// The injured worker's right to choose their medical practitioner /// The role and responsibilities of the medical practitioner and specialist service providers /// The process for monitoring medical treatment, consultations, referrals and specialist care /// Requirements for access to medical records and the provision of information /// The process for the management of communication between the parties including identifying the preferred means of contact and expected reporting timeframes. <p>Independent Medical reviews:</p> <p>Independent medical opinions or medical reviews may be sought when there are concerns about issues such as the diagnosis, proposed treatment, certified level of incapacity etc. Where multiple, opinions/ reviews are sought, this can result in stress for the injured worker, delays, and increased costs to the insurer. Procedures should be developed that include but are not limited to:</p> <ul style="list-style-type: none"> /// The process for obtaining an independent medical review /// The process for informing the injured worker of the reasons for seeking such a review /// The process for discussing matters of concern with the injured worker and the injured worker's treating medical practitioner /// The process for the management of medical records and the provision of information /// The process for the management of communication between the parties including identifying the preferred means of contact and expected reporting timeframes /// The process for conciliation where the injured worker objects to an independent medical review.

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<p>10. Return to Work</p>	<p>Procedures are to be established that define how the insurer will:</p> <p>10.1 Co-ordinate those involved in the injury management process including but not limited to the following:</p> <ul style="list-style-type: none"> (i) Injury Management Co-ordinators (ii) Occupational Rehabilitation Providers (iii) Return to Work Co-ordinators <p>10.2 Manage Injury Management Plans and Return to Work Plans. This should include but not be limited to the following:</p> <ul style="list-style-type: none"> (i) Ensure the development and implementation of plans when required (ii) Manage consultation requirements between key parties (iii) Ensure the assessment of return to work options is completed thoroughly (iv) Ensure the return to work hierarchy is applied (v) Ensure workplace visits are undertaken when necessary (vi) Ensure the identification and modification of suitable and meaningful alternative duties where practicable (vii) Recognise limitations during return to work (viii) Ensure the regular review and modification of plans when necessary (ix) Regularly assess outcomes for all parties involved 	<p>The injury management program should encourage full and open communication between all parties involved in the injury management and return to work process. Poor communication can lead to delays, confusion and misunderstanding and is recognised as presenting a major barrier to effective injury management. Proper planning and co-ordination of the injury management process will facilitate effective communication between the parties, eliminate duplication of effort and confusion and ensure that the injury management process runs smoothly and results in positive outcomes for the injured worker.</p> <p>Return to Work Plans – A simple plan for co-ordinating and managing the treatment, rehabilitation and return to work of an injured worker. A return to work plan is to be developed for an injured worker who suffers an injury that is likely to result in total or partial incapacity for more than 5 working days and/ or requires or is likely to require ongoing medical treatment.</p> <p>Injury Management Plans – A comprehensive plan for co-ordinating and managing the treatment, rehabilitation and return to work of an injured worker. An injury management plan is to be developed for an injured worker who is likely to be totally or partially incapacitated for work for more than 28 days and/ or the primary treating medical practitioner indicates that the injury is complex.</p> <p>Where plans are developed, at a minimum both the injured worker and the employer are to agree to co-operate and comply with the plan. Plans are to be signed by both parties, wherever possible, however other mechanisms for obtaining agreement (i.e. via email) may be utilised in circumstances where it may not be practicable to pursue signatures.</p> <p>Plans must be realistic, achievable, tailored to the individual’s circumstances and developed as soon as practicable in consultation with the relevant parties. Plans must be reviewed regularly by the relevant parties and modified where necessary.</p>
<p>11. Management of Alternative Duties</p>	<p>Procedures are to be established that define how the insurer will:</p> <p>11.1 Ensure alternate duties are both suitable and meaningful</p> <p>11.2 Ensure employers provide notification of alternative duties that are available (facilitated by a list of general duties to be supplied by the Board)</p> <p>11.3 Ensure matters relating to employers unwilling and/or unable to provide alternative duties are referred to the Board</p>	<p>The employer has an obligation to provide suitable and meaningful alternative duties at the workplace while the injured worker recovers from injury.</p> <p>The insurer should have procedures in place that ensure injured workers are consulted and given the opportunity to participate in the identification and selection of alternative duties. Injured workers should also actively contribute to and participate in the process of reviewing and providing feedback to the employer or the insurer on the adequacy and appropriateness of alternative duties provided. The insurer should develop procedures that include but are not limited to:</p> <ul style="list-style-type: none"> /// Communicating to employers their responsibility for identifying alternative duties as well as their obligation to compile a list of alternative duties that is to be supplied to the insurer /// Assisting employers to identify and provide alternative duties /// Monitoring and reviewing an employer’s ability to identify and provide suitable alternative duties /// Advising employers of the consequences of failure to identify and provide alternative duties /// Managing employer non-compliance /// Notifying employer non-compliance to the Board.





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