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POLICY No:	OSH 10
DIVISION:	Occupational Health and Safety
SUBJECT:	Injury Management and Rehabilitation Policy
REPORTING OFFICER:	Executive Manager Engineering and Development Services
ENABLING LEGISLATION:	Occupational Safety and Health Act 1984

OBJECTIVE:

In accordance with the intention of the Workers' Compensation and Rehabilitation Act 1981 and the Rehabilitation Review 1997, Council has developed and adopted an Injury Management and Rehabilitation Policy together with its associated procedures.

The main objectives of implementing an Injury Management and Rehabilitation Policy and procedures are:

- To establish a systematic approach to injury management and rehabilitation throughout the Council immediately following work related illness, injury and disability.
- To establish that it is the responsibility of the Council to ensure retraining options are available to employees who are identified as not being able to return to pre-injury duties.
- For Council to identify a person responsible for Injury Management Co-ordination, to oversee workplace-based injury management and rehabilitation programs.
- To develop injury management and rehabilitation based on best practice initiatives that best serve the Council.

POLICY:

Injury Management Overview

Injury management and rehabilitation is the planned and coordinated process of restoring the health and productivity of employees following the occurrence of a work related injury. The aim of injury management and rehabilitation is to achieve the best level of recovery and return to the workforce for the injured employee. Components of such a program may include:

- **Injury Management** – Prompt medical diagnosis and treatment to maximise the rate and extent of recovery. Initial return to work guidelines established and implemented between the employee, supervisor and doctor.
- **Rehabilitation** – In cases where recovery and return to work are not successful within two – four weeks from injury, an approved rehabilitation provider may become involved



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in the process. Involvement from the employee, supervisor and doctor remain essential to the process.

Injury Management Policy Statement

It is the policy of Council to make provision for the injury management and rehabilitation of all employees who have sustained an accepted work related illness, injury or disability.

In this context injury management is defined as:

“a workplace managed process incorporating the Local Government and medical management from the time of injury to facilitate where practicable, efficient and cost effective maintenance in or return to suitable employment within the Local Government.” - As required a rehabilitation provider may also be involved in the process.

To assist in the timely and effective injury management of employees, the Council’s Injury Management Coordinator has been identified to oversee the injury management and rehabilitation practices.

PARTICIPANTS IN INJURY MANAGEMENT AND REHABILITATION

The role of the following key participants in the injury management and rehabilitation processes.

1. Injured Employee

The following employees should be involved in injury management:

Workers’ Compensation – lost time – Employees with a work related injury who are likely to sustain lost time from work.

Workers’ Compensation – no lost time – Injured employees who, due to physical/psychological problems are experiencing difficulty coping with their work.

Responsibilities of Injured Employees undergoing Injury Management and Rehabilitation:

To report any injury to a supervisor/manger as soon as practical.	✓
To seek workplace first aid treatment until able to attend for medical treatment of the condition.	✓
To obtain a first medical certificate and complete a workers compensation claim form.	✓
To attend for progress medical certificates as required (including inability to attend work) and submit them to the appropriate supervisor no later than one working day after seeing the medical practitioner.	✓



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To participate in injury management and rehabilitation as recommended by the medical practitioner.	✓
To maintain regular contact with the manager/supervisor, treating medical practitioner and the Shire injury management coordinator/approved vocational rehabilitation provider.	✓
Where possible to postpone any leave due to be taken, so as to minimise disruption to the return to work process. If leave is to be taken and requires travel outside of WA, the employer and self-insurer are to be notified.	✓
To attend examinations by medial specialists as arranged by the treating medical practitioner, employer or self-insurer.	✓
To notify the employer of a second job.	✓
On commencing a return to work, the normal work procedures and work performance expectations apply, unless otherwise statement. These include clocking on/off, arriving on time, advising of inability to attend work and reason for any non-attendance.	✓

Rights of Injured Employees undergoing Injury Management and Rehabilitation:

- To receive weekly payments during periods of incapacity for work following a workers' compensation injury.
- To be actively involved in all decisions regarding treatment and injury management and rehabilitation.
- To choose the treating medical practitioner and approved rehabilitation provider.
- To access medical/rehabilitation reports regarding their case.
- To have individual injury management and rehabilitation information restricted to relevant parties i.e. member of the case team.
- To apply to the Workcover WA Conciliation and Review Directorate in cases where compensation entitlements are disputed.

2. Case Team

The Case Team comprises of all relevant parties involved in the injury management and rehabilitation of the injured employee. The team aims toward achieving the injury management and rehabilitation goals as agreed with the injured employee, with each member utilising their area of expertise. The case team may comprise of:

Supervisor/Manager

Management/supervisors have a key role in ensuring the success of injury management and rehabilitation programs. They are responsible for actively supporting the injury management and rehabilitation process by working closely with the doctor and injured employee to provide meaningful duties for the return-to-work program. Specific responsibilities are outlined in the "Injury Management and Rehabilitation Procedures – Manager/Supervisor."

Injury Management Coordinator



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The Payroll Officer may be appointed as the Injury Management Coordinator.

The Injury Management Coordinator is responsible for supporting management and injured employees by:

- Assisting and supporting injured employees and management in all respects of compensation, injury management and rehabilitation.
- Liaising with and developing a suitable return to work plan in conjunction with the injured employee and appropriate case team members.
- Monitor the progress of injury management and rehabilitation.

Specific responsibilities are further outlined in the “*Injury-Management and Rehabilitation Procedures*”.

Medical/Paramedical Practitioners

Professionals involved in treatment prior to or during the injury management and rehabilitation process may include: GP/ Medical specialist, occupational therapist, psychologist, physiotherapist and exercise physiologist.

Vocational rehabilitation provider

The rehabilitation provider’s role is to deliver a professional rehabilitation program to those injured employees who may require ongoing assistance with their return to work. The approved rehabilitation provider should deliver an appropriate program in a timely and cost effective manner, working closely with the injured employee, treating medical practitioner and case team. Approved rehabilitation providers must be accredited by Workcover Western Australia.

3. Self Insurers

The insurer for Council is the Local Government Insurance Service. The Claims Administrator/Supervisor may be involved in case team meetings and is able to provide updated medical and claims information as required.

Scheme Injury Management Coordinator

The Coordinator oversees the injury management and rehabilitation requirements of all Scheme members. Specifically the Scheme Injury Management Coordinator performs the following:

- Identification of claims requiring injury management and rehabilitation assistance.
- Liaison with relevant case team members.
- Review of injury management and rehabilitation progress.
- Provision of advisory services to Scheme members.
- Provision of injury management and rehabilitation services as required.



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Confidentiality

The injury management and rehabilitation process is confidential and all records relating to injured employees will only be available to authorised persons. An information release authority must be signed by the employee and is held by the Supervisor/Injury Management Coordinator as outline in Appendix 1.

Evaluation of Injury Management and Rehabilitation Programs

The effectiveness of injury management and rehabilitation programs will be closely monitored by the Scheme Rehabilitation Coordinator. Feedback will be provided to the Local Government and the Scheme management/board.

Injury Management and Rehabilitation Training

Training of Local Government representative to address injury management and rehabilitation functions will be carried out on an as-needs basis by the Scheme Injury Management Coordinator.

Sick Leave Injury Management

Providing alternate duties or restricted normal duties for those injured employees recuperating from sick leave, assists in reducing the human and economic costs of absenteeism and is encouraged.

Rehabilitation for sick leave employees is fully funded by the work area. Injured employees who should be considered for injury management and rehabilitation include those who are able to return to work on reduced hours and/or modified duties. The Shire or the Scheme Injury Management Coordinator may be contacted for guidance in the return to work process.



INJURY MANGEMENT AND REHABILITATION PROCEDURES

DEFINIATIONS

Local Government Injury Management Co-ordinator – is a person appointed by the Local Government and responsible for supporting management and injured employees as outlined in the Injury Management and Rehabilitation Procedures.

Case Team – a team of persons comprising all relevant parties involved in the injury management and rehabilitation of the injured employee.

Vocational Rehabilitation Provider – persons(s) whose role it is to deliver a professional rehabilitation program to those injured employees who may require ongoing assistance with their return to work.

Scheme Claims Manager – is a person employed by Local Government Insurance Service and who may be involved in case team meetings.

Scheme Injury Management Co-ordinator – is a person employed by Local Government Insurance Service and who oversees the injury management and rehabilitation requirements of all scheme members.

1. Injury Management

Provision of First Aid

The provision of appropriate on-site first aid immediately (within 30 minutes), following an injury can significantly reduce the damage and long term effects associated with the injury. It is the responsibility of the injured employee and/or supervisor to ensure that first aid treatment is sought. Once on-site first aid assessment and treatment has been given, a referral to a medical practitioner can be made as required, by the supervisor/manager.

Manager/Supervisor

The role of the manager/supervisor is to perform the following with the support and follow up by the Local Government Injury Management Coordinator. A checklist for use is given in Appendix 2.

- **Administration**

Once the employee reports an injury and has sought first aid and/or medical treatment, the supervisor should discuss the procedures for making compensation claims. If the doctor provides a workers' compensation first medical certificate, the supervisor should ensure the employee fills out a claim occurrence form and



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attach the first medical certificate. These documents should then be forwarded to the Scheme via the Payroll/Insurance Officer within three (3) working days.

- **Information**

The supervisor should explain the procedure for claim acceptance, pay procedures and the employer's commitment to injury management and rehabilitation. The supervisor should issue a 'Rehabilitation Information Pack' to the employee outlining injury management and rehabilitation procedures. The supervisor should notify the manager and the Injury Management Coordinator if the employee is to incur any lost time.

- **Establish a Return-to-Work**

The 'Rehabilitation Information Pack' also contains a letter to the treating doctor outlining the availability of alternate duties that should be filled out at the time of issue of the Pack. In developing return-to-work programs the supervisor/manager should take the following into consideration:

1. Many work areas within the Local Government (including Parks and Gardens, Libraries, Swimming Pools and Administration) should have available duties that may be suitable for injury management and rehabilitation. Development of the return-to-work goal should occur in consultation with the injured employee and the treating doctor. Provision of meaningful work duties may include pre-injury duties on a part time basis, modified pre-injury duties (part or full time), supernumerary (assisting others) or different duties in the same or different section.
2. A return-to-work may only commence following appropriate certification by a medical practitioner, clearly stating the appropriate work duties and any restrictions. If there are any queries regarding the medical certificate issued, the supervisor/manager may contact the GP to clarify details.
3. A return-to-work plan should be completed and a copy held by the employee, supervisor and injury management coordinator. The Establishment of time frames for monitoring progress including ongoing medical reviews, upgrading duties and hours and follow up times to ensure a successful return to work. Documentation of all review meetings should occur with case team members being informed of progress as appropriate.
4. Provision of appropriate training and supervision for any duties that are unfamiliar to the employee should occur. Ensuring the injured employee and their direct supervisor and co-employees clearly understand the program details and that appropriate feedback is provided to the employee on a regular basis is essential. Normal performance/disciplinary procedures apply to employees undergoing injury management and rehabilitation.



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5. Injured employees are paid in the normal manner by the Local government, whilst on workers' compensation. The Local Government is reimbursed for hours not worked by the self-insurer at a later stage. If necessary, supernumerary return-to-work programs that are funded by the insurer, may be negotiated. The department where the employee was injured is responsible for the injury management and rehabilitation and ongoing payment of wages, even when the employee is performing alternate duties in another department.

- **Contact and Support**

The supervisor should advise that he/she will be in regular contact with the employee to offer support and assistance in the recovery process.

2. Rehabilitation Assessment

Case team meeting

To commence the injury management and rehabilitation process a case team meeting may be implemented. The employee and relevant team members may be invited to attend by the Local Government Injury Management Coordinator. Further case team meetings may be arranged as required.

2.2 Scheme Injury Management Coordinator

Scheme Injury management Coordinator/Injury Management Coordinator

If it is identified that an employee has or may lose 10 working days or more following an injury, the Scheme Injury Management Coordinator will contact the Local Government Injury Management Coordinator to discuss the progress of the employee.

If required, the Scheme Injury Management Coordinator will contact the treating doctor to discuss the need for rehabilitation. If deemed appropriate, the Scheme Injury Management Coordinator will then arrange to meet with the injured employee, supervisor, and Injury Management Coordinator to discuss the appointment of a rehabilitation provider.

3. Rehabilitation Plan

After undertaking an initial assessment, the rehabilitation provider should present a plan outlining the rehabilitation strategy and timeframes.



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Physical/Psychological Conditioning

These elements aim to identify the employee's area of physical/psychological limitations and work towards improving work capacity:

- **Functional Capacity Evaluation (FCE)**
Determines physical/psychological capacity in relation to work demands.
- **Work hardening program**
Intensive physical/psychological program to improve areas of limitation.
- **Psychological Management**
To address emotional issues that may be impacting on ability to return to work.
- **Ongoing medical/paramedical management**
Includes physiotherapy, chiropractic, medication and medical management.

Return-to-Work Process

The aim of the return-to-work process is to return the employee to permanent appropriate duties as soon as possible. To achieve this, the following procedure may be undertaken:

- **Job Analysis** – A suitably qualified person will attend the work site to obtain details of the employee's normal duties. If the employee cannot return to these immediately, a job analysis of alternate duties may also be carried out.
- **Modification of Duties/Equipment** – Following the job analysis, recommendations may be made concerning modification of duties/equipment to allow the employee to undertake the duties more safely.
- **Return-to-work program** – A program incorporating a graduated return to normal, selected or alternative duties may be required for injured employees. Based on the job analysis, discussion will occur with the employee and treating doctor regarding the employee's gradual increase in hours and duties. If an employee cannot return to original or similar duties, retraining may be required. This process involves:

Vocational assessment – to determine vocational options

Counselling and support – for the change in career direction

Work Trial – on job trial to ensure suitability for the new work.

Job seeking skills – to assist in permanent job placement.

The provision of alternative duties will not be possible on an unlimited and permanent basis unless such duties constitute a position within the organisation, the position is readily available and the person meets the maximum employment standards of the position.

Appointment for alternative internal/external permanent positions should follow normal recruitment and selection procedure. However suitable training should be



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provided to ensure that the injured employee can adequately perform alternative job requirements within a reasonable period of time, to provide them with a competitive edge.

Feasible work trials and/or permanent work placements may be negotiated with other Local Governments within the Scheme. This can only occur once it has been clearly demonstrated that all options within the Local Government have been exhausted. The Local Government will remain liable for ongoing costs associated with the injury and will remain responsible for wages until the injured employee is permanently placed within the new Local Government.

4. Outcome

The goal of injury management and rehabilitation has been achieved once the following permanent employment arrangements have been reached and sustained for up to three (3) months.

- Same job with employing Local Government
- Similar job with employing Local Government
- New job with employing Local Government
- New job within Local Government
- New job outside of Local Government

If no return-to-work is achieved and injury management and rehabilitation is deemed unable to provide further assistance or the rehabilitation entitlement is exceeded, case closure may occur. If further injury management and rehabilitation is required at a later stage and sufficient injury management and rehabilitation funds are available, the case file can be re-opened by the employee or case team member.

Options for the employee, once case closure has occurred, should be outlined by the rehabilitation provider/injury management coordinator.



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APPENDIX 1 – AUTHORITY TO OBTAIN/RELEASE INFORMATION

AUTHORITY TO OBTAIN/RELEASE INFORMATION

I _____ hereby authorise the Injury Management Coordinator/Rehabilitation provider to:

- Communicate with the Local Government:
- Release relevant information regarding my injury management and rehabilitation; and
- Obtain relevant information regarding my injury management and rehabilitation.

From the following agencies and/or individuals:

1. Supervisor/Manager: _____
2. Local Government Insurance Services: _____
3. Treating Doctor: _____
4. Others as nominated below:

Signed: _____ Date: _____

Witness: _____ Date: _____



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APPENDIX 2 – INJURY MANAGEMENT CHECKLIST AND GUIDELINES

Following Injury:

- Ensure first aid/medical treatment is sought immediately.
- Once first medical certificate received, issue claim form for the employee to complete.
- Send completed claim documents to the Local Government Insurance Service within three (3) working days from time of receipt of documents.

If the employee is Certified Unfit for Work:

- Issue 'Rehabilitation Information Pack' to the employee.
- Discuss with the employee the availability of alternate duties and outline in the 'Letter to the Doctor.'
- Complete the 'Letter to Doctor' in the 'Rehabilitation Information Pack'.
- Based on doctor's recommendations and medical certificate provided, arrange a return-to-work program with the employee.
- Advise the employee of importance of keeping medical certificates up to date by attending doctor on a regular basis.
- Contact the employee re progress every 1-2 weeks until fully fit for work.

If the employee has any Difficulties:

- Advise them to see their doctor immediately to be reviewed and obtain a medical certificate.
- If doctor certifies further time off work, contact the Injury Management Coordinator (HR Officer) re appointing an approved rehabilitation provider.
- Contact the employee re progress every one to two weeks.

Options for Alternate Duties Include:

- Pre-injury duties on a part time basis
- Modified pre-injury duties (part or full time)
- Supernumerary (assisting others)
- Different duties in the same or different section

Guidelines for Identifying Alternate Duties:

Back Injuries

- No repetitive stooping, bending, heavy lifting (over 5-10kg) or twisting of back.
- Allow regular change of position eg. – between sitting, standing and walking.
- Or otherwise advised by a medical practitioner.

Upper Limb Injuries



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- No reaching above shoulder height
- No repetitive arm movements
- No forceful arm movements eg – pushing, pulling etc.
- Or otherwise advised by a medical practitioner.

Neck Injuries

- No repetitive movements eg – side to side and up and down
- Avoid extreme neck movements
- Avoid static neck postures
- Or otherwise advised by a medical practitioner.

Lower Limb Injuries

- Avoid climbing steps and stairs and Avoid crouching, kneeling, twisting
- Avoid repetitive foot action
- Allow for seated duties where possible
- Or otherwise advised by a medical practitioner.



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Appendix 3 – Letter to Doctor and Alternate Duties Form

To the treating Medical Practitioner

Dear Doctor,

REHABILITATION

The Council employee _____ has suffered an injury/illness and has been referred to you for treatment.

It is the policy of the Local Government to make provision for the occupational injury management and rehabilitation of all employees. Your patient has been given a brochure on injury management and rehabilitation services provided through the Local Government, that may be of interest to you.

An essential part of the role in assisting employee's normal duties and any alternate duties that are currently available are attached for your consideration.

It would be appreciated in you could provide to the Local Government a list of suitable duties, recommended hours, special considerations and a list of possible alternatives based on the nature of the injury and capabilities of the employee.

If the Local government can be of any further assistance or you have any queries please do not hesitate to contact _____ on Ph. _____