

Return to Work Program

Supporting those who support others. Achieving the best recovery outcomes at work.

Document number: PO2023-059

Approval

Policy owner	Executive Direc	Executive Director People and, Culture and Safety		
Approved by	Executive Lead	Executive Leadership Team		
	State Council			
Date approved	17.06.2023	Review date	17.06.2025	



Purpose

- 1. The Society of St Vincent de Paul (NSW) and the company titled the St Vincent de Paul Society NSW (together the Society) have developed this Return to Work (RTW) program to support an organisational culture that enables injured workers to safely return to work as soon as possible in a way that facilitates the best possible recovery outcomes.
- 2. This RTW program is designed to meet the requirements of the NSW Workers Compensation Act 1987, the Workplace Injury Management and Workers Compensation Act 1998 and the Workers Compensation Regulation 2016, it outlines:
 - our commitment to supporting injured workers to recover at work
 - the processes for reporting incidents, providing immediate support to injured workers, and developing recover at work plans
 - the rights and obligations of injured employees and the role and responsibilities of the people who support injured workers
 - how we manage records related to workplace injury and illness
 - processes for managing disputes.

Scope

3. The RTW program applies to all Society Personnel (including members, volunteers, and employees). If a section applies only to employees, volunteers, or members, that is specified within the section of the document.

Related policies and procedures

- 4. The RTW program is supported by the Health & Safety Policy, the Incident Management Policy, and a range of safety related procedures available via the Safety Hub.
- 5. Other related Society policies and procedures include:
 - Code of Conduct
 - Feedback and Complaints Policy
 - Internal Grievance Policy
 - Privacy Policy
 - Record Management Policy
 - Respectful Workplace Policy.

Guiding principles

- 6. The prevention of workplace injury and illness is our priority. We are committed to building a culture that enables positive safety outcomes for all Society workers, the people we assist, and others impacted by our work.
- 7. In the event of work-related injury or illness, early reporting, and early intervention play an important role in achieving positive recovery outcomes.
- 8. Supporting workers to safely return to work and recover at work achieves better outcomes than recovery at home.

Leadership and commitment

- 9. To support the early and safe return to work and the best possible recovery outcomes for injured workers, the Society is committed to:
 - working closely with our claims agents and insurers to ensure timely and proactive support for our injured workers
 - providing a positive work environment that supports a safe recovery at work
 - identifying and providing suitable work duties for injured workers while actively rehabilitating
 - developing flexible and graduated return to work and recover at work plans in consultation with injured workers and their nominated treatment provider(s)
 - maintaining the confidentiality of medical and rehabilitation records
 - engaging appropriately qualified professionals, both internally and externally, to support the management or workplace injury and illness.

Our workplace arrangements

Return-to-Work Coordinator

- 10. The Society employs a full-time Return-to-Work Partner who performs the role and functions of the Return-to-Work Coordinator as defined by workers compensation legislation.
- 11. The Return-to-Work Partner is supported by a team of Safety Partners, and reports to the Director, Safety and Emergency Management. Refer to Appendix B for contact details of our Return-to-Work Partner and the Safety and Emergency Management Team.

Workers compensation insurance arrangements

- 12. The Society maintains workers compensation insurance in accordance with legislative requirements.
- 13. In the event of work-related injury or illness (physical or psychological), Society employees have access to workers compensation insurance. There are many types of claims that have specific eligibility criteria. Entitlements including:
 - medical treatment and rehabilitation expenses
 - weekly payments (if unable to work normal hours due to a workplace injury)
 - lump sum payments for permanent impairment.
- 14. The workers compensation claims agent makes all decisions on liability for claims and approves medical treatment on behalf of the insurer. Refer to Appendix C for the details of our Workers Compensation Insurer and claims agent.

Volunteer accident insurance arrangements

- 15. Society members and volunteers are not eligible for workers compensation.
- 16. The Society maintains a separate volunteer accident insurance policy for members and volunteers who are injured or become unwell as a result of their work for the Society. This provides limited coverage for several circumstances including:
 - reimbursement of out-of-pocket non-Medicare medical expenses
 - weekly benefits for loss of salary from other paid employment, if applicable
 - lump sum payments for specific injuries (e.g. fractures).

- 17. Members or volunteers who are injured while performing their duties will be advised of the volunteer insurance arrangements by their Manager, Supervisor or President and supported by the Safety and Emergency Management Team to make a claim.
- 18. Once submitted, the insurer's claims agent will liaise directly with the injured member or volunteer regarding the insurers liability decision and any relevant entitlements. Refer to Appendix D for the Volunteer Accident Insurance policy number and contact details.

Record keeping

- 19. The Society recognises the importance of protecting an individual's dignity and commits to keeping information concerning injured workers confidential.
- 20. Society employees with access to confidential workers compensation or injury management information must comply with confidentiality requirements of the privacy and workers compensation legislation and the Society's Privacy Policy.
- 21. Injury management records for members, volunteers and employees will be recorded in SolvInjury, an electronic injury management system used to assist in the case management of injured and ill workers. There is no requirement for a separate hard copy file.
- 22. Access to Solvinjury is restricted to people directly involved in the injury management process. Access to the system must be approved by the Director, Safety and Emergency Management or their delegate.
- 23. Historical electronic files related to injury management and Return to Work programs not captured in SolvInjury will be stored on Microsoft SharePoint and only be accessible to the Return-to-work Partner and the Director Safety and Emergency Management.
- 24. Information will only be released to other parties upon request, and only as prescribed by legislation and in line with the Society's Privacy Policy.
- 25. Recover at work files must be stored, managed, and destroyed in line with the Society's Records Management Policy and Records Retention Schedule. Recover at work files will be stored for a period of seven years following the closure of a claim.

Information and training

- 26. Information about the Society's incident response process and entitlements to workers compensation and volunteer accident insurance is included in mandatory online safety training, discussed during local inductions, and displayed on posters in Society workplaces.
- 27. The icare 'At work, you can recover better' poster is displayed in all workplaces.
- 28. The Return-to-Work Partner provides injured workers with advice about insurance entitlements and associated processes immediately following the report of a work-related injury or illness. This information is supported by an injury management information pack for injured workers.
- 29. The insurance claims agent will provide further details to our workers, and confirm entitlements, process, and obligations once a claim has been initiated. For further information refer to the Injury Management Info Pack-for Employees and Injury Management Info Pack-for Members and Volunteers.

Preferred rehabilitation providers

30. In some situations, an external workplace rehabilitation provider may be assigned to support an injured worker to achieve their return to work goals.

31. The Society has established a preferred list of rehabilitation providers who have a good understanding of our organisation. Preferred providers are regularly reviewed and updated to ensure best practice service delivery is being maintained. Refer to Appendix E for current preferred providers.

After an incident occurs

First aid

- 32. To minimise the potential impact of an injury, workers should seek first aid where necessary.
- 33. The Society has a network of trained first aiders and first aid equipment to support this process. Refer to the first aid information on the Safety Hub and Members and Volunteer Resources Platform.

Incident reporting

- 34. All workplace injuries and/or illness must be reported to the relevant Manager, Supervisor or President as soon as reasonably possible.
- 35. Incidents including injury and illness must be verbally reported to the Manager, Supervisor or President and an Incident Report Form completed no later than the end of the day/shift. All incidents are recorded in the Society's Integrated Risk Management System (IRMS).

Notifiable incidents

- 36. Serious incidents including any that involve the death of a person, serious injuries and dangerous near miss incidents must be reported to SafeWork NSW immediately.
- 37. Workers are required to contact the Safety and Emergency Team immediately following a serious incident or injury, who will notify SafeWork NSW on behalf of the Society.
- 38. If unable to contact the Safety and Emergency Management Team, the relevant Manager, Supervisor, President or workers must call SafeWork NSW on 13 10 50 straight away and minimise the disturbance of the areas around the incident. For further information refer to the <u>Incident or Hazard Response Poster</u> displayed in our workplaces.

Early intervention and support for workers

Early medical treatment

39. If a worker sustains an injury at work they should seek medical attention as soon as possible, if needed.

Initial triage and advice

- 40. All reasonable efforts will be made to support injured workers through what can be an uncertain time. The Return-to-Work Partner will contact an injured worker as soon as possible following the initial notification. During this initial discussion, the Return-to-Work Partner will:
 - seek to understand how the incident occurred
 - assess the potential seriousness of the incident
 - identify initial return to work options, if relevant
 - advise injured workers of their right to make an insurance claim and explain the associated process.
- 41. The Return-to-Work Partner may also initiate early contact with other key stakeholders including the claims agent, the nominated treating doctor and/or treatment providers and the Manager, Supervisor or

President. The purpose of this contact is to identify any support required and commence the early development of a Recover at work Plan.

Notification of the insurer

- 42. The Society's Return-to-Work Partner will notify our workers compensation claims agent of all employee injuries as soon as reasonably possible within the first 48 hours.
- 43. In the event of a Member or volunteer injury, the Return-to-Work Partner will support the Member or volunteer to notify the insurer if they intend to make a claim.

Positive communication with injured workers

44. Maintaining ongoing and positive communication is essential to achieving good recovery and work outcomes. The Return-to-Work Partner will provide regular communication with the injured worker and other stakeholders to ensure the support is a coordinated effort. Contact may be by telephone, email or in person as appropriate.

Informed consent to release and exchange information

- 45. When signing a State Insurance Regulatory Authority (SIRA) NSW Certificate of Capacity, an injured employee provides consent for parties to contact them.
- 46. Injured employees will also be asked to sign the Society's Consent to Release and Exchange Information Form (Appendix F) which further outlines what consent means in relation to return and recovery at work.
- 47. Members and volunteers who seek the Society's support in liaising with their treating medical providers must sign the Society's Consent to Release and Exchange Information form before we are able to liaise with any nominated doctors or treatment providers.
- 48. Informed consent for the release and exchange of information between the Society and others involved in managing the injury allows all parties to work together collaboratively to reach the best possible rehabilitation outcomes for the injured worker.
- 49. Signed consent forms will be stored securely in Solv Injury and retained as evidence of informed consent to exchange and store information related to the individual's workers compensation claim and/or recover at work plan.
- 50. If an employee does not provide consent via the Society's consent form, we will advise the workers compensation claims agent of the situation and agree on an approach to managing the individual claim.
- 51. An injured employee who has previously provided consent to release and exchange information can withdraw or modify this consent at any time by notifying our Return-to-Work Partner in writing.

Managing weekly payments for injured employees

- 52. Employees with a workplace injury or illness who are unable to return to work straight away may be entitled to weekly benefits payments in lieu of normal wages.
- 53. If the workers compensation insurer has accepted liability for a claim, either provisionally or outright, the Society will commence payment of weekly benefits on behalf of the insurer through the payroll system, provided that:
 - the insurer has provided written notice confirming the acceptance of liability, the amount to be paid and the commencement date; and

- a valid SIRA NSW Certificate of Capacity, issued by the nominated treating doctor, has been received.
- 54. If a liability decision is pending, the injured worker may elect to use accrued sick leave and/or annual leave entitlements until the insurer determines liability. If liability for the claim is subsequently confirmed for the given period, any sick leave and/or annual leave used will be reversed with the time lost processed as an approved weekly benefit under the workers compensation claim.
- 55. Weekly benefits will be paid in accordance with the individual worker's entitlement, which is determined by the insurer. Weekly benefit entitlements are calculated using 52 weeks of payroll history (where available), which is provided to the workers compensation claims agent by the Society's Payroll team. This is used to determine an injured workers' Pre-Injury Average Weekly Earnings (PIAWE), which is then used to calculate weekly benefits in accordance with the workers compensation legislation. Further information about the calculation of weekly benefits can be found on the icare website.
- 56. Members and volunteers seeking reimbursement for loss of income associated with an accepted injury claim are required to liaise directly with the volunteer accident insurer.

Recovery at work

The provision of suitable duties

- 57. The Society will provide suitable duties to injured workers in line with their certified capacity in all situations where this is reasonably practicable.
- 58. The identification of suitable duties will consider the:
 - availability of work duties within the work group, and more broadly within the Society
 - worker's current capacity for work and the anticipated duration of any restrictions
 - worker's pre-injury employment, skills, and experience
 - views of the injured worker, their nominated treating doctor and other treatment providers.
- 59. Suitable duties must be meaningful and productive, and not demeaning to the injured worker.
- 60. Suitable duties will be developed by the Return-to-Work Partner in consultation with the worker, the Manager or Supervisor, the claims agent, the nominated treating doctor and other stakeholders as appropriate. In the case of a member injury, the President and relevant Regional Director will be consulted.
- 61. Suitable duties will be documented in a Recover at work Plan, developed by the Return-to-Work Partner, and provided to all parties (e.g. worker, supervisor, treating doctor), for review and signoff.

Recover at work plans

62. Recover at work plans are designed to temporarily assist workers as they recover and progressively return to pre-injury-duties. Where pre-injury-duties cannot reasonably be achieved, the plan will seek to reach the best possible recover outcome for the worker. Recover at work plans are reviewed regularly, and following any changes to the Certificate of Capacity, to ensure they are up to date and consistent with the worker's rehabilitation goals. Refer to Appendix F for a copy of the Society's Recover at work Plan Template.

Attending treatment whilst on a recover at work plan

- 63. Workers who are not in the workplace on a full-time basis, either because of their current medical restrictions or because they are part-time workers, are expected to arrange treatment and medical appointments outside of working hours where reasonably practicable.
- 64. Where the injured worker is working full-time hours and it is not reasonably possible to schedule treatment or medical appointments outside working hours, appointments should be made at either at the beginning or at the end of the work day/shift.

Managing the termination of employment

- 65. The Society will not terminate an injured staff member's employment based on physical capacity, ill health or any other issues associated with an injury or illness within the first 6 months of the injury or the illness occurring. However, an employee may be terminated at any time for valid reasons other than work-related injury or illness (e.g., misconduct, poor performance) in accordance with the Managing Underperformance Policy.
- 66. In all instances, the termination of a staff member's employment on the basis of physical capacity or ill health will be assessed on a case-by-case basis and requires approval by the Manager, Employment Relations, the relevant Executive Director and the Executive Director, People and Safety.

Vocational rehabilitation and job seeking

- 67. If an injured worker is no longer employed by the Society or the return to work goal is changed to return/recover at work with another employer, the insurer may engage a rehabilitation provider to assist the injured worker with the following types of services:
 - Vocational counselling and rehabilitation
 - · Advice and assistance regarding job seeking
 - Advice or assistance regarding vocational retraining

Legislative rights and obligations of injured employees

Rights of injured employees

- 68. Injured employees have a right to:
 - medical treatment as soon as possible after the incident
 - submit a claim for workers compensation
 - nominate their own treating doctor and treating professionals (including but not limited to physiotherapists, counsellors, rehabilitation specialists)
 - change their nominated treating doctor or treating professionals in consultation with and approval of the workers compensation claims agent
 - undertake suitable duties at work that are appropriate to their skills, experience, and stage of recovery
 - participate and have a say in developing their recover at work plan
 - seek assistance from any recognised employee associations or industrial union for support with any dispute or matter arising from the implementation or review of this program
 - nominate and bring a support person to any recover at work discussion with the Return-to-Work Partner and/or their Manager or Supervisor
 - privacy and confidentiality in relation to their injury or illness

access mechanisms for resolving complaints and disputes.

Obligations of injured employees

69. Injured employees are required to:

- report the incident and any associated injury as soon as reasonably possible
- nominate a treating doctor
- advise their nominated treating doctor that the Society promotes recovery-at-work and in most cases can offer suitable duties
- provide and maintain a current Certificate of Capacity
- provide copies of the current Certificate of Capacity to the line manager and Return-to-Work
 Partner as soon as reasonably possible following a review or update
- actively participate in the recovery-at-work process and comply with their Recover at work Plan developed by the Return-to-Work Partner, and the injury management plan developed by the Insurer
- comply with treatment recommendations provided by the treating doctor and any treatment providers
- arrange medical and treatment appointments outside of work hours where possible
- attend appointments arranged by the Society and/or the insurer and/or rehabilitation provider, where applicable
- seek approval from the workers compensation claims agent prior to changing nominated treatment providers
- participate in regular, open, and transparent conversations with the Return-to-Work Partner, their Manager or Supervisor and the workers compensation claims agent in relation to current capacity and any barriers to recovery.

Roles and Responsibilities of others

70. Executive Directors, Directors and Regional Directors must:

- actively and visibly promote a culture that enables positive safety outcomes
- take action to address risks highlighted by our incident and injury experience
- encourage early reporting and early intervention for workplace injury and illness
- support local Managers and Supervisors to meet their responsibilities including the identification
 and approval of suitable duties and the acceptance of flexible and gradual recover at work plans
 for our injured workers.

71. Presidents must:

• ensure that their Regional Director is immediately notified of any injury to a member or volunteer.

72. Managers and Supervisors must:

- actively support their injured workers
- provide immediate support to workers following an injury or illness notification
- inform workers of their right to lodge a claim for workers compensation or volunteer accident insurance if they wish to do so and provide them with a copy of the relevant recover at work information pack

- ensure that workplace injuries and illness are reported, investigated and corrective actions planned and implemented within reasonable timeframes
- make reasonable adjustments to the workplace to accommodate injured workers
- identify suitable duties that are meaningful, productive, and appropriate to the worker's skills and stage of recovery, in consultation with the worker and the Return-to-Work Partner
- actively manage the recover at work plan in consultation with the injured worker and the Returnto-Work Partner
- maintain the confidentiality of injured employees in accordance with applicable privacy legislation.

Return-to-Work Partner

- 73. The role of the Return-to-Work Partner is to provide professional injury management support that facilitates the best possible recovery outcomes for workers. This involves regular contact with injured workers and their people leaders, and collaboration with all stakeholders.
- 74. The Society's Return-to-Work Partner must:
 - provide the Society with professional advice to ensure compliance with legislative requirements related to injury management and workers compensation
 - provide information to injured workers about the workers compensation and volunteer accident insurance processes including their rights and obligations
 - lodge an injury notification with the insurer for all work-related employee injuries within 48 hours of becoming aware of the injury
 - help Managers and Supervisors to identify suitable duties and ensure that suitable duties are
 offered in all situations where this is reasonably practicable
 - liaise with external stakeholders including the nominated treating doctor, treatment providers, and insurance claims agent
 - prepare recover at work plans in consultation with injured workers and relevant stakeholders.
 - monitor, review, and update individual recover at work plans at regular intervals and/or when new information is received
 - maintain regular contact with injured workers and their Managers and Supervisors to monitor progress and identify any barriers to the recovery
 - maintain confidential case notes and injury records in line with relevant privacy and workers compensation legislative, and Society requirements.
 - assist the Society to identify alternate roles for workers in situations where a worker is unable to return to their pre-injury duties in their substantive role.

Workers compensation claims agent (on behalf of the insurer)

- 75. Workers compensation claims agents perform all claims management functions including:
 - contacting an injured worker within 3 days of being notified
 - making a provisional liability decision within 7 days of being notified and advise the injured worker and the Society of the outcome and reasons for the decision
 - approving reasonably necessary medical treatment and the payment of weekly benefits
 - managing the payment of the medical treatment
 - reimbursing the Society for the payment of weekly benefits to injured workers

- developing meaningful injury management plans for all injured employees in consultation with the injured worker, their treating doctor, and the Society
- ensuring that all stakeholders are aware of their obligations under the injury management plan
- informing injured workers of their procedural and legislative obligations
- appointing a rehabilitation provider when necessary to assist recovery
- arranging independent medical reviews of injured worker in cases where there is insufficient or conflicting information regarding injury causation or an injured worker's diagnosis, treatment plan, recovery timeframe, capacity for work or rehabilitation goals
- keeping the Society informed of all ongoing liability decisions
- finalising a claim in a timely manner.

Nominated Treating Doctor

76. The role of the nominated treating doctor is to:

- diagnose injury or illness
- assess the injured worker's capacity to work based on the available medical evidence
- promote the benefits of work and the importance of recovering at work with the injured worker
- provide a treatment plan aimed at supporting the worker to return to pre-injury duties
- issue Certificates of Capacity that include: a clear medical diagnosis, the details of any reasonably necessary treatment, the details of any capacity restrictions, and a treatment plan
- review an injured worker's progress on a regular basis, at least once every 28 days
- actively participate in the recovery-at-work processes including participation in case conferences involving the Return-to-Work Partner, and/or the claims agent as agreed with the injured worker
- provide relevant information as requested by the Society and the claims agent for the purposes of injury management and recover at work planning.

Dispute prevention and resolution

- 77. In cases where an injured worker raises concerns about the Return to Work program and associated processes, a member of the Safety and Emergency Management team will meet with the worker to understand the nature of their concerns, and where possible assistance will be offered to address their concerns.
- 78. If the employee has specific concerns about the offer of suitable duties, this should be raised with the Return-to-Work Partner in the first instance, who will make every effort to resolve the disagreement through discussion with key stakeholders. If the matter remains unresolved it will be referred to the workers compensation claims agent who will take further action to review the dispute, which may involve the engagement of an external rehabilitation provider or mediation.
- 79. Disputes about claim decisions made by the workers compensation claims agent should be referred to the claims agent in the first instance. Unresolved disputes can be escalated to icare, who will explain the claim dispute process, which may involve review by the Personal Injury Commission. Other options for workers include contacting the Independent Review Office (IRO) or SIRA. Contact details for iCare, IRO and SIRA are in Appendix C.

Consultation

- 80. In developing this Return to Work program, the Society has consulted with workers and their unions and/or representatives.
- 81. The Society values the feedback and contribution of workers in the development and ongoing review of this program. Feedback on the Return to Work program can be provided to your Safety Partner or the Return-to-Work Partner at any time.

Review

- 82. The Return to Work program will be reviewed every two years, or more frequently as required to align with change in legislation or practice.
- 83. The review of the Return to Work program will be carried out in consultation with workers and their unions, by the Director, Safety and Emergency Management.

Further assistance

- 84. In the first instance, Society Personnel should speak with their manager, supervisor, or President regarding any questions about the implementation of this program.
- 85. For further assistance regarding the Return to Work program, Society Personnel may contact the Return-to-Work Partner or the Director, Safety and Emergency Management.

References

86. Legislation, regulations, or other instruments relevant to this policy include:

- Australian Privacy Principles
- Health Records and Information Privacy Act 2002 (NSW)
- Privacy Act 1988 (Cth)
- Privacy and Personal Information Act 1998 (NSW)
- Workers Compensation Act 1987 (NSW)
- Workers Compensation Regulation 2016 (NSW)
- Work Health and Safety Act 2011 (Cth)
- Work Health and Safety Regulation 2017 (NSW)
- Workplace Injury Management and Workers Compensation Act 1998 (Cth)

Approval and amendment history

Version	Approval authority	Date	Amendment summary
PO2023-	Executive Leadership Team	24.05.2023	NA – New document
059	State Council	17.06.2023	

Appendix A - Definitions

Certificate of Capacity	Usually completed by the worker's nominated treating doctor, the certificate of capacity is used in the NSW workers compensation system to describe the nature of a worker's injury/illness, their capacity for work, and the treatment required for a safe and durable recovery.
Injury Management Consultant (IMC)	A registered medical practitioner experience in occupational injury and workplace-based rehabilitation who facilitates and helps the nominated treating doctor, worker, insurer, employer, and other service providers to progress a workers return to/recover at work.
Independent Medical Examination (IME)	An assessment conducted by an appropriately qualified and experienced medial practitioner to help resolve an issue in injury or claims management.
Injured worker	A Society member, volunteer or employee who has sustained a work-related injury or illness.
Injury Management Plan	A plan developed by the insurer in consultation with the worker, employer and treating doctor which enables all stakeholders to work together with the injured worker to establish and achieve recovery goals.
Integrated Risk Management System (IRMS)	The system used by the Society to report and manage incidents, safeguarding reports, feedback complaints, risk and hazards.
Nominated Treating Doctor (NTD)	The treating doctor nominated by a worker for the purposes of an injury management plan for the worker.
Pre-injury-duties	The duties a workers performed before the work-related injury or illness occurred.
Recover at work Plan	A plan developed for all injured workers who have capacity for some work but are not fit for pre-injury duties. It details the suitable duties that have been identified within an injured workers capacity. It is an agreement between the injured worker and the Society supported by the nominated treating doctor.
Rehabilitation Providers	An external provider who can assist with recover- at-work planning and injury management. Typically, an allied health professional who specialise in workplace-based rehabilitation.
Suitable duties	Temporary duties that may be assigned to an employee to assist recovery from an injury or illness.
Solv Injury	A databased used to manage all workers compensation and records and claim data, as well as case management records related to member and volunteer injuries and associated insurance claims.

Weekly benefits	Payments made to an injured worker under the workers compensation insurance scheme if unable to work because of an injury or unable to work their normal hours due to an injury.
Worker	For the purpose of this document the term worker means any employee, volunteer or member carrying out work on behalf of the Society.
Workers compensation claims agent	An agent for the NSW workers insurance scheme who manage employee workers compensation claims on behalf of icare.

Appendix B - Safety and Emergency Management Team

Return-to-Work Partner	Director, Safety and Emergency Management
Maria Joshua	Matthew Mitchell
Mobile Phone: 0481 054 757	Mobile Phone: 0434 567 799
Email: maria.joshua@vinnies.org.au	Email: matthew.mitchell@vinnies.org.au
Safety	Partners
Senior Safety Partner	Suzanne Madden
Commercial Enterprise, Communications,	Mobile Phone: 0490 379 076
and fundraising	Email: Suzanne.madden@vinnies.org.au
Senior Safety Partner	Tessie Phan
Vinnies Services	Mobile Phone: 0490 379 057
	Email: tessie.phan@vinnies.org.au
Safety Partner	Lea England
Members, Volunteers and Regional	Mobile Phone: 0458 260 365
Operations	Email: <u>lea.england@vinnies.org.au</u>

Appendix C - Workers Compensation Insurance Contacts

Workers Compensation Claims Agent	Workers Compensation Insurer
Employers Mutual NSW Limited (EML)	icare NSW
Phone: 133 365	Phone: 13 77 22
	https://www.icare.nsw.gov.au/

Other contacts		
Independent Review Office (IRO)	State Insurance Regulatory Authority (SIRA)	
Phone: 13 94 76	Phone: 13 10 50	
https://iro.nsw.gov.au/	https://www.sira.nsw.gov.au/	

Appendix D - Volunteer Accident Insurance

Volunteer Accident Insurer	Claims Agent
Arch Underwriting (ABN 27 139 250 605)	Corporate Services Network (CSN)
	CSN act on behalf of Arch Underwriting
Policy Number:	
P0019373AH2021AU0	Koreylee Chalmers
	Claims Assessor
	Telephone: 02 8256 1777
	Email: koreylee_chalmers@csnet.com.au
	Tina Zouglis
	Claims Manager
	Telephone: 02 8123 0411
	Email: tina_zouglis@csnet.com.au

Other contacts	
Insurance Broker - Aon	Lucia Castro
	Client Executive - Health & Benefits
	Telephone: 02 9253 8404
	Email: <u>lucia.castro@aon.com</u>
	Matthew Brown
	Client Director - Health & Benefits
	Telephone: 02 9253 7248
	Email: matthew.j.brown@aon.com

Appendix E - Preferred Rehabilitation Provider

Recovre	
Phone: 1300 550 276	
https://www.recovre.com.au/	

Appendix F- Consent to Release and Exchange Information Form

Name of Injured worker	
Claim Number (if known)	
Organisation Details	St Vincent De Paul Society NSW
	·
Contact Person	Maria Joshua
Role	Return-to-Work Partner

Worker's declaration

I have discussed this consent form with the Return-to-Work Partner. I understand that any information collected will be kept in a confidential electronic case file, with access restricted to those who are directly responsible for coordinating and monitoring my recovery at work.

I understand that the Society will:

- only collect personal and health information that is relevant and necessary to manage my recovery at work and facilitate the workers compensation claim
- only use and disclose information for the purpose for which it was collected
- keep any information collected separate from my other personnel records
- take reasonable steps to protect my information by ensuring it is stored securely, kept no longer than necessary, and disposed of appropriately
- allow me to access my information without unreasonable delay, unless providing access would be unlawful or pose a serious threat to another person's life or health.

Considering the above, I authorise and consent to my employer collecting, using and disclosing personal and health information relevant to managing my injury and workers compensation claim.

I understand my consent can be withdrawn at any time by notifying our Return-to-Work Partner in writing, and that may result in changes to the way my return to work/recovery at work is managed.

Injured Worker Name	Signature	Date
e i e e e e e	Ct	
Employer Representative Name	Signature	Date
Employer Representative Name	Signature	Date

Appendix G - Recover at work Plan Template

Plan Details		
Recover-at-Work Plan Number		
Start Date	Review Date	
Plan Description		
Worker's Detail		
First Name	Surname	
Occupation	Phone (Mobile)	
Phone (Work)	Phone (Home)	
Email	Date Of Iniury	
Claim Number	Business Unit	
Injury Description		
Line Manager Name	Line Manager Contact Number	
Line Manager Email		
Return-to-Work Goal		
Return-to-Work Goal	Estimated Date of Return-to-Work	
Pre-Injury Hours/Day	Pre-Injury Days/Week	
Short-term Goal	Anticipated Return to Pre-injury-duties	

Treating Docto	r			Med	ical Revie	w Date		
Treating Docto	or Contact Num	Contact Number Treating Doctor Fmail						
Current Ca	pacity							
Has capacity fo	or work							
€								
From				То				
Restrictions								
Working H	ours							
Working II	ours							
w/c	MON	TUE	WED	THU	FRI	SAT	SUN	HRS/WK
Duties								
DUTIES			WORKPLACE MODIFICATIONS					
Recovery S	Strategies							

Workplace Agreement

A copy of this Recover-at-Work Plan will be given to the injured worker and the employee's treating medical practitioner.

The duties outlined in this plan cannot be changed without the permission of the treating medical practitioner

In signing this document, the worker confirms that they:

- 1. Have participated in the development of the above Recover-at-Work Plan
- 2. Agree to the arrangements as detailed
- 3. Understand that duties provided under this Recover-at-Work Plan are for a temporary period and are in place to assist recovery to pre-injury duties
- 4. Are required to arrange medical appointments outside work hours where possible. If this is not possible, organize appointments at the beginning or end of a shift to minimize time away from work in consultation with their people leader.

The following parties have agreed to the program and understand their responsibilities:

Name	Signature	Date
Injured Worker		
People Leader		
Treating Doctor		
Return-to-Work Partner		
Other		

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Appendix H – Summary of return to work and recover at work processes



