



UNIVERSITY
OF WOLLONGONG
AUSTRALIA

UOW WELL@WORK

RETURN TO WORK PROGRAM

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1 Introduction

The University of Wollongong is committed to the prevention of physical and psychological injury and illness to its employees and workers as defined by the Work Health and Safety (WHS) Act 2011 in accordance with its Workplace Health and Safety Policy. On the occasion when an injury or illness occurs to a University employee in the workplace the University is equally committed to assisting employees recover at work following a workplace injury in accordance with legislative and State Insurance Regulatory Authority (SIRA) guidelines.

2 Purpose

The purpose of the Return to Work Program is to facilitate the timely and safe return to work for employees who have sustained a work related injury or illness. This Return to Work Program forms a component of, and supports the University's Injury Management Program.

The same program principles should be adhered to whether the employee has sustained a physical or psychological injury or illness. Whilst there are some components that will differ given the nature of the injury, it is important that the general components of the procedure are the same.

As a licensed self-insurer under Section 211 of the Worker's Compensation Act 1987, the University of Wollongong has developed the following Return to Work Program in consultation with workers via the WHS Committee.

3 Scope

The Return to Work Program applies to all UOW employees. The Return to Work Program is to be read in conjunction with the University's [Injury Management Program](#).

4 Preventing Injury and Illness at Work

The University is committed to the prevention of injury and illness to its workers by providing a physically and psychologically safe and healthy work environment for employees, students and visitors. To achieve a safe workplace, the University has in place a comprehensive WHS management system with the aim to identify, assess and control the risk of hazards.

Further information about the UOW WHS Management System can be found via the following link:

- <http://staff.uow.edu.au/WHS/index.html>

Additionally, the University has a comprehensive WHS consultation arrangement in place to consult with workers on WHS matters. This includes a WHS Committee and supporting committees in faculties and divisions according to the UOW WHS Consultation Statement. Further information can be found via the following link:

- <http://staff.uow.edu.au/WHS/consultation/WHScommittee/index.html>

The University has a WHS training schedule which aims to provide workers, students and visitors with information and skills with regards to workers compensation, return to work and various WHS procedures and topics.

Further information can be found at the following link:

- <http://staff.uow.edu.au/WHS/training/index.html>

The University monitors its WHS performance to identify links between injury management data and the review of WHS procedures at regular intervals. This process is outlined by the following procedure [WHS Performance Measurement and Reporting Guidelines](#).

4.1 After an Incident

Information on the University's procedures for first aid and incident management (including the University's register of injuries and reporting to SafeWork NSW) are available at the following links:

- [First Aid](#)
- [Hazard and Incident Reporting](#).

5 Responsibilities

5.1 University

In order to meet legislative requirements and develop a positive culture that promotes recover at the work the University will:

- ensure the health, safety and welfare at work of all workers
- maintain its self-insurance license in accordance with legislative and SIRA requirements
- develop, implement and review the Return To Work Program in consultation with workers and relevant unions at least every two years and produce the program in printed form and display a summary of the program prominently in workplaces
- display, at a minimum, a summary of the Workers Compensation legislation about giving notice of an injury and the making of a claim
- appoint an appropriately trained Return To Work Coordinator to negotiate, develop and implement return to work policies and procedures
- select and nominate approved workplace rehabilitation providers in consultation with workers and relevant unions
- maintain a register of injuries in which workers record details of work-related injuries
- keep a record of wages paid for at least the previous five years
- notify SafeWork NSW immediately of serious injuries or illnesses or dangerous incidents by phoning 13 10 50
- not dismiss an injured employee because of the injury within six months of the employee first becoming unfit for employment
- provide employees with adequate information about workers compensation and return to work procedures, including their choice of doctor and rehabilitation provider and how to change providers, if required
- advise the worker's nominated treating doctor of the requirements of the employee's usual job and availability of suitable duties
- make suitable duties available to injured employees who are certified fit for suitable duties (partially incapacitated) if reasonably practicable to do so
- comply with medical restrictions resulting from the work injury as obtained from the treating doctor
- provide the employee with a Workers Compensation Claim Form if requested
- participate and cooperate in the establishment of an Injury Management Plan for an injured employee and give effect to that plan at the workplace
- comply with obligations imposed on the employer in the Injury Management Plan
- cooperate with engaging assistance from a workplace rehabilitation provider if the employee faces barriers in returning to work

- cooperate with providing retraining or different job opportunities to an injured employee who is unable to return to their pre-injury job
- respect the privacy and confidentiality of medical examinations by arranging a separate discussion between the employee, doctor and employer, and
- promote the health benefits of good work through the implementation of the Well@Work program.

5.2 Employees

Employees are required to:

- cooperate with the University to prevent work-related injuries and illnesses to self and others
- cooperate with the University to enable it to meet their return to work obligations
- cooperate in workplace changes designed to assist the return to work of fellow employees if injured
 - notify the University of a workplace injury as soon as possible after the injury happens
 - specify one nominated doctor or medical practice who is prepared to participate in the development and implementation of an injury management plan
 - give consent for the nominated treating doctor to provide relevant information to UOW using the Certificate of Capacity, claim form or other form of authority
 - participate and cooperate in the establishment of the initial and subsequent injury management plans
 - make all reasonable efforts to return to work with the University as soon as possible
 - comply with the activities detailed in injury management plan(s), and
 - advise of any difficulties with return to work as soon as practical to prevent delays in addressing any problems.

Employees will be informed of their obligations and rights by being given a copy of the return to work program and the 'Information for Injured Workers' SIRA brochure upon submitting a claim for workers compensation.

5.3 Return To Work Coordinator

The responsibilities of the Return to Work Coordinator include:

- assist injured employees, where safe and practicable, to remain at work while they recover or return to work as soon as possible if they require time away from work. This includes liaising and/or consulting with:
 - the injured employee and their manager or supervisor
 - the employee's treating health practitioner (subject to the consent of the worker), an workplace rehabilitation provider (if involved), and the employee's representative (where one has been chosen by the employee)
- monitor the progress of an injured employee's recovery and potential to return to work take steps to prevent a recurrence or aggravation of the injury help resolve any return to work related issues or disputes
- assist the injured employee and the University meet their return to work obligations under the legislation.

Details of the University's appointed Return To Work Coordinator(s) are listed at the following webpage: <http://staff.uow.edu.au/ohs/managinginjuries/injurymgmt1/index.html>

The University's Return To Work Coordinator(s) will be provided the necessary resources for their role and are authorised to prepare Return To Work Plans in accordance with legislative, SIRA and University guidelines.

5.4 Case Manager (WHS Unit)

The Case Manager for the workers compensation claim will be either the Claims Coordinator or the Injury Management Coordinator who will fulfil the role of Return Work Coordinator and Injury Management Coordinator. The Case Manager will:

- ensure that University is kept aware of its legislative obligations in relation to the injury management program
- within three working days of being notified that a worker has sustained a significant injury, contact the workers supervisor, worker and (if necessary) the nominated treating doctor. Subsequently, an injury management plan must be developed in line with timeframes in the University's injury management program
- within seven days of being notified that a worker has sustained a significant injury, begin provisional payments of weekly benefits and medical expenses, or advise the worker why payments will not be made
- consult with the injured worker, supervisor and nominated treating doctor in the development of an injury management plan
- provide the injured worker, supervisor and nominated treating doctor with information on the injury management plan initially and as the plan progresses
- inform the worker that their entitlements to weekly benefits can be suspended if they do not reasonably comply with their injury management plan and what they must do to prevent the suspension
- have procedures in place for an injured worker to change their nominated treating doctor and inform the injured worker of these requirements
- consult with the injured worker, supervisor and nominated treating doctor when referring to a workplace rehabilitation provider. Advise the injured worker that they can choose a rehabilitation provider and inform the injured worker of the process to be followed when changing a rehabilitation provider
- ensure vocational retraining and/or assistance to obtain employment with a new employer is arranged for an injured worker as soon as it is identified that a return to pre-injury duties and provision of suitable duties is no longer possible
- ensure accuracy of payment of weekly benefits in accordance with wage as advised by the University and legislative requirements
- provide injured worker with information about their weekly benefits and entitlements and how they may change over time.
- develop and implement the return to work program, educate the workforce, keep injury and return to work statistics and develop policies to improve systems
- provide information on the return to work process and associated workers compensation benefits to injured workers
- obtain or sight the injured worker's consent before obtaining or releasing information about the worker's return to work
- determine the injured worker's needs by discussion with the worker, the nominated treating doctor and other treatment practitioners
- identify suitable duties and assisting the injured worker to return to work as soon as possible
- prepare a return to work plan in consultation with key parties that documents suitable duties and work restrictions
- refer to an approved workplace rehabilitation provider as needed
- be the focal point for all contact relating to the injured worker.
- coordinate and monitor progress in treatment, rehabilitation provider services and return to work plans

- assist in the redeployment of injured workers (either internally or externally) into suitable employment when an injured worker cannot return to pre-injury duties
- collect information on locally based resources in the community, including bilingual resources, and making this information available to injured workers where necessary
- maintain and manage confidential case notes and records in line with relevant legislation and guidelines (refer to Section 9 for confidentiality of injury management information).

5.5 Nominated Treating Doctor

The nominated treating doctor is required to:

- complete certificates of capacity
- arrange and monitor appropriate treatment
- specify medical restrictions and advise on the suitability of duties offered by the employer
- provide information to the WHS Unit and employer in relation to injury management and return to work plans for the injured worker
- certify time off only if it is medically necessary
- promote an early and safe return to work of the worker
- review the progress of recovery of the injured worker and revise the worker's medical management as needed
- arrange referral to an approved workplace rehabilitation provider, if required, and if not initiated by the employer or WHS Unit
- advise employer/WHS Unit on availability for discussion about injury management and return to work.

5.6 Workplace Rehabilitation Provider

The workplace rehabilitation provider must:

- deliver services to worker, University and WHS Unit in a cost effective, timely and proactive manner to achieve a safe and durable return to work
- promote an early and safe return to work of the worker
- ensure the needs of the worker and employer are identified by means of adequate and appropriate assessment
- identify barriers to injured worker's return to work and develop strategies to address these
- identify and design suitable duties for the worker to assist the employer to meet their obligations in providing suitable employment
- identify and coordinate rehabilitation strategies that ensure the worker is able to safely perform their duties
- consider workplace industrial relations and human resource matters that may affect the worker's return to work
- focus initially on return to work in the worker's pre-injury employment or, if that is not possible, on other employment in line with the hierarchy of return to work
- arrange appropriate retraining and placement in alternative employment when the worker is unable to return to pre-injury duties
- communicate with relevant parties throughout service provision to ensure progress towards the return to work goal.

6 Program Principles

6.1 Early Commencement of Injury Management and Return to Work

Workers are required to report injuries (physical and psychological) as soon as possible to their supervisor or the WHS Unit. Injuries are required to be formally reported via the University's online hazard and incident reporting system SafetyNet. Further information on how to use SafetyNet is available via the following link:

- <http://staff.uow.edu.au/ohs/reportingahazardorinjury/reporting/index.html>.

Employees and supervisors are required to notify the WHS Unit on 4221 3931 of any workplace injury immediately upon notification and no longer than 48 hours.

The Return to Work Coordinator is to make contact with the nominated treating doctor, injured employee and supervisor to assist in the development of the return to work plan. The Return to Work Coordinator is required to liaise with the employee and their support team on regular intervals to enable positive and effective communication.

Further information is available in the following WHS Unit internal procedures:

- [Initial Notification of Injury and Early Contact](#)
- [Development of Return to Work Plans](#)
- [Injury Management Planning](#)

6.2 Consultation

Consultation will occur at regular intervals as per the NSW Workplace Injury Management and Worker's Compensation Act 1998, or earlier if agreed to, between the employee and their representative. This will cover rights and obligations, arrangements for return of an injured worker on suitable duties and general conduct of rehabilitation activities, policy and procedures.

Consultation will occur between the injured worker, supervisor and Return to Work/Injury Management Coordinator after each treatment review with the Nominated Treating Doctor to prepare a return to work plan.

6.3 Information Exchange

The Return to Work Coordinator is required to gain written consent from the injured worker to obtain, use and disclose injury management information. This is obtained using the [Authority to Obtain/Release Information Form](#) or certificate of capacity signed by the employee.

Information which may be exchanged includes but is not limited to:

- medical information
- work arrangements such as duties, hours of work
- wage details for weekly payments.

The employee will be informed of the benefits of information exchange and the associated benefits, rights and obligations and potential penalties for non-compliance during initial contact by the Return To Work Coordinator.

6.4 Weekly Payments

Where an employee requires time away from work as a result of their workplace injury, weekly payments will be made in accordance with legislative requirements. This includes determination of pre-injury average weekly earnings (PIAWE). Payments will be made in accordance with the University's regular payroll processes.

Additional payments such as medication or travel costs can be claimed using the [Workers Compensation Expenses Claim Form](#).

6.5 Provision of Suitable Duties

The University will make every effort to, where reasonably possible, provide suitable duties to assist with recovery at work.

Suitable duties as defined in Section 32A of the Worker's compensation act 1987 means employment in work for which the worker is suited, having regard to the following:

- (a) the nature of the worker's incapacity and pre-injury employment,
- (b) the worker's age, education, skills and work experience,
- (c) the worker's place of residence,
- (d) the details given in the medical certificate supplied by the worker,
- (e) the provisions of any injury management plan for the worker,
- (f) any suitable employment for which the worker has received rehabilitation training,
- (g) the length of time the worker has been seeking suitable employment,
- (h) any other relevant circumstances.

When the injured worker is fit to return to work on suitable duties, the Injury Management/Return To Work Coordinator will consult with the nominated treating doctor and/or workplace rehabilitation provider to discuss whether suitable duties could reasonably be found at the workplace, and if not, the other options available.

The University will ensure that suitable duties will be:

- consistent with the injured worker's capacity and medical restrictions,
- meaningful and productive,
- agreed with all relevant parties and written in an individual return to work plan,
- time limited and include review dates, representing a graded return to pre-injury hours/duties, and
- consulted with all parties if changes are initiated.

Suitable duties may not be provided by the University if restrictions on the certificate of capacity cannot be reasonably accommodated.

Where suitable duties cannot be identified at the substantive workplace, other areas of the University may be investigated or alternatively SIRA's Work Trial Program can be used to provide suitable duties with another host employer. This may also include other programs identified in Section 53 of the Workplace Injury Management Act 1988 including but not limited to retraining, provision of equipment, modifications to the workplace or SIRA's JobCover program.

When suitable duties cannot be identified at the workplace, further details on job seeking and retraining can be obtained from the rehabilitation provider involved in the case.

6.6 No Disadvantage Requirements

The University is committed to ensuring that participation in a return to work plan will not, of itself, disadvantage an injured employee. All efforts will be made to resolve disagreements about the return to work program, or its components, through discussion and in a spirit of cooperation.

- This includes the following key principles:
- the University may permit employees access their sick leave as per award arrangements if they provide a medical certificate. If the medical condition is subsequently accepted as a compensable injury, the employee's sick leave entitlements will be adjusted
- injured employees are able to access certain leave entitlements in addition to workers compensation
- all monies that the employee is entitled to under the workers compensation legislation will be passed on to that employee as soon as practicable by the University after being notified
- if the employee was scheduled for higher duties or a training program will continue to do so, provided that the higher tasks or training program are consistent with medical restrictions
- The University may allow an employee who is injured and who is scheduled for a performance appraisal, to continue with that appraisal
- an employee may not be dismissed within six months of becoming unfit for employment as a result of a workplace injury.

Where an employee feels that they are being disadvantaged by participating in the Return to Work Program they are to follow the Dispute Resolution Process, Section 6.7

6.7 Dispute Resolution Process

The University of Wollongong will attempt to resolve any dispute with all stakeholders upon notification. Employees who have an issue or a dispute with regards to the suitable duties are to raise this with either the Injury Management Coordinator or Manager WHS Unit in the first instance.

Every endeavour will be made to resolve any disagreement about the return to work program through discussions amongst the key parties informally. This may include the case manager, injured employee, nominated treating doctor, the supervisor/manager.

An approved workplace rehabilitation provider, if not already involved, can be utilised to assist in resolving disagreements.

If there is disagreement about suitable duties or fitness for work, referral to an Injury Management Consultant can be organised through by the WHS Unit.

Disputes regarding the treatment provided, including the need for ongoing treatment, can be referred for a second opinion. Independent Consultants assess, for example physiotherapy, osteopathy, chiropractic, psychological and remedial massage treatment and independent doctors can assess medical treatment being offered or provided. If the parties are unable to reach agreement, advice can be sought from the SIRA Assistance Service on 13 10 50.

If a worker's compensation claim is disputed, the employee or employer may seek resolution through the Workers Compensation Commission. This includes disputes relating to an Injury Management Plan, a Return To Work Plan and/or suitable duties.

Employees can refer to the [SIRA website](#) on how to make a formal complaint regarding their claim.

7 Approved Rehabilitation Providers

Referrals to approved rehabilitation providers should be considered when the employee requests one, the return to work plan is complex or there is a conflict of interest. These referrals should be made as early as possible and discussed with the Return To Work Coordinator, Case Manager, Supervisor and employees. Employees have the right to refuse or request a change in provider. This is to be made in writing and addressed to the Return to Work Coordinator.

Upon appointment the Return to Work Coordinator, Supervisor and employee will discuss the unique needs and arrangements for the workplace and seek clarification where required. All parties will work with and cooperate with the Rehabilitation provider to enable recovery at work. Additionally rehabilitation providers will have access to the workplace and injured employees as reasonably required.

The nominated approved rehabilitation providers to assist with return to work are:

- Injury and Occupational Health, 32 Swan St Wollongong, ph: 4229 6111
- Recovery Partners, PO Box 346 Sutherland NSW 2499.

Consultation on the appointment of nominated rehabilitation providers will be undertaken via the WHS Committee (which includes Union representation) as per the scheduled review of this program (every 2 years).

Other approved rehabilitation providers may be selected by the injured worker in consultation with the Case Manager, worker and the WHS Unit. A list of approved rehabilitation providers can be found at the [SIRA website](#).

8 Interpreters

Interpreters may be utilised when the need is identified by utilising the Translating and Interpreting Service (TIS) ph: 131 450 or other identified means.

9 Confidentiality

All injury management information obtained from the worker's during their return to work, or while undertaking injury management, is confidential. Injury management information includes:

- file notes, letters, faxes and return to work places completed by the Case Manager
- treating doctor assessment and reports
- specialist doctor assessment and reports if the injured worker was referred to the specialist by the treating doctor
- approved workplace rehabilitation providers documents such as:
 - referral/approval for workplace rehabilitation service
 - approved rehabilitation provider plans
 - approved rehabilitation provider progress reports
 - invoices for workplace rehabilitation services return to work plans
 - injury management consultant reports.

Injury management information does not include:

- section 40 assessments
- copies of independent medical examiner reports initiated by the WHS Unit
- print outs of claims estimates and premium costs
- common law and legal proceedings.

The obtaining of information by the Case Manager will be discussed at the commencement of rehabilitation and consent will be sought from the worker before speaking with a treatment provider via signing the Authority to Obtain and Release Information Form. The worker's consent may be withdrawn at any time. However, this may result in return to work not proceeding and affecting the worker's entitlements to workers compensation benefits.

Injury management information will be maintained within a case file and access will be confined to relevant documents on the case file and limited to:

- those who have a direct responsibility for coordinating, monitoring or providing return to works services for the injured worker, and
- those involved in providing clerical and administrative support to these personnel.
- Examples of people with a legitimate need to know may include:
 - Return To Work Coordinator
 - workers immediate supervisor
 - supervisor of the area in which suitable duties have been identified
 - occupational physician, workplace medical officer
 - Workers Compensation Case Manager or personal office handling workers compensation claims.

The WHS Unit shall maintain and protect open and closed case files, including electronically stored information, from unauthorised access, interference, misuse, loss and theft. Hardcopy files will be held in locked filing cabinets and electronic files will be kept on password protected IT system.

10 Training and Awareness Strategies

Information will be provided to employees on their rights and obligations of the Return to Work Program via the following training programs and initiatives:

- University Induction
- Professional staff supervisor training programs including [Manager's HR Toolkit](#)
- [UOW Safe@Work website](#).

A summary of the requirements of the Workplace Injury Management and Workers Compensation Act 1998 is available at the following link:

<https://documents.uow.edu.au/content/groups/public/@web/@ohs/documents/doc/uow262817.pdf>

11 Record Keeping

Recording keeping for Return to Work plans will be conducted in accordance with the [Workers Compensation File Management Procedure](#)

12 Related Documents

- [Return to Work Plan template](#)
- [Injury Management Plan template](#)
- [Authority to Obtain and Release Information](#)

13 Monitoring, Review and Agreement

Monitoring of the effectiveness of this Return to Work Program will be undertaken via reporting of return to work indicators such as average time lost rate to the WHS Committee, University Council as well as quarterly SIRA benchmarking reports.

This Return to Work Program will be reviewed in consultation with employee's and their representatives via the WHS Committee on a biennial basis. Minutes of the WHS Committee will outline the record of agreement.

14 Version Control History

Version Control	Date Released	Approved By	Amendment
1	November 2004	Manager WHS	New document created
2	November 2007	Manager WHS	Updated as per scheduled review. No significant changes.
3	August 2010	Manager WHS	Updated to reflect Human Resources Division name change.
4	March 2011	Manager WHS	Updated in accordance with WorkCover Guidelines for Workplace Return to Work Programs
5	June 2011	Manager WHS	Minor amendments in accordance with WorkCover advice.
6	March 2012	Manager WHS	Re-brand.
7	June 2014	Manager WHS	Scheduled review
8	August 2017	Manager WHS	Updated in accordance with SIRA Guidelines for Workplace Return to Work Programs.
9	February 2020	Manager WHS	Updated in accordance with SIRA amendments to Guidelines for Workplace Return to Work Programs. Updated to include reference to mental health and psychological illness/injury in the purpose, prevent injury/illness at work and program principles sections.