1 Purpose and application

(1) These procedures are to give effect to Injury and Illness Management Policy 2015 ("the policy").

(2) These procedures apply to all staff.
   
   (a) Part 1 of these procedures applies to cases where the injury or ill health is compensable.

   (b) Part 2 of these procedures applies to all other cases of injury or ill health.

2 Commencement

These procedures commence on 1 January 2015.

3 Interpretation

Words and phrases used in these procedures and not otherwise defined in this document have the meanings they have in the policy.

Note: See clause 6 of the policy.
PART 1 – COMPENSABLE INJURIES AND ILLNESSES

4 Medical treatment

If an injured staff member considers that their injury or illness warrants medical treatment, they must seek such treatment as soon as possible.

5 Lodging a claim for workers’ compensation

(1) A staff member who wishes to claim workers’ compensation must:
   (a) obtain a certificate of capacity from their medical practitioner at their first appointment or as soon as possible thereafter; and
   (b) provide copies of the certificate as soon as possible to:
       (i) their supervisor; and
       (ii) Injury Management Services.

(2) The certificate of capacity must provide details of the staff member’s ability to perform pre-injury duties.

(3) A claim for workers’ compensation is considered to have been made only after receipt of the certificate of capacity and any supporting documents.

(4) Injury Management Services will notify the University’s workers’ compensation insurer within 48 hours of receiving the certificate of capacity.

(5) The staff member’s entitlement to workers’ compensation will be assessed and determined by the insurer.

Note: Further information about the role of insurers, and other stakeholders in the workers’ compensation system, is available from the WorkCover Authority of NSW website.

6 Weekly workers’ compensation benefits

(1) In order to calculate the applicable weekly benefit rate, Injury Management Services:
   (a) must access the staff member’s payment history; and
   (b) may direct the staff member to provide a completed record of hours worked form for the duration of the injury or illness.

(2) After a claim is accepted, weekly workers’ compensation benefits will be paid through the normal payroll system.

(3) All inquiries about payment of weekly benefit entitlements should be directed to the Injury Management Coordinator.

7 Return to work

(1) The staff member must make themselves available to discuss suitable return to work options with their supervisor and Injury Management Coordinator once the notification of injury or illness has been reported.
(2) The Injury Management Coordinator is responsible for developing a return to work plan for the injured staff member, in consultation with relevant stakeholders.

(a) This process must begin as soon as possible after the Injury Management Coordinator receives the staff member’s certificate of capacity.

(b) The return to work plan must be provided to the staff member’s treating doctor for approval.

(3) The Injury Management Coordinator will contact the staff member as soon as possible after receiving notice of the injury to discuss its seriousness and return to work options.

(4) Arrangements for a return to work may require extensive discussion, and will usually involve:

(a) the staff member;
(b) their supervisor;
(c) the Injury Management Coordinator;
(d) the staff member’s treating medical practitioner; and
(e) any allied health professional(s) treating the staff member.

(5) In arranging a staff member’s return to work the University expects that:

(a) the staff member will actively participate in the return to work plan;
(b) the supervisor will provide supervision of appropriate duties and actively assist the staff member’s return to work;
(c) the staff member’s treating medical practitioner will liaise with the Injury Management Coordinator about medical advice and recommendations; and
(d) the Injury Management Coordinator will work with all stakeholders to develop the return to work plan, and provide support and advice throughout its implementation.

(6) The Injury Management Coordinator may request a case conference with the staff member and their treating medical practitioner to discuss any or all of:

(a) the plan of treatment for the staff member;
(b) the terms of any return to work plan;
(c) progress made in implementing the return to work plan; or
(d) barriers or impediments to implementing the return to work plan, and proposals for overcoming them.

8 Finalisation of claims

(1) The Injury Management Coordinator is responsible for finalising a workers’ compensation claim as soon as possible after receiving a finalisation letter from the insurer.

(2) The staff member must notify the insurer and the Injury Management Coordinator of any outstanding issues upon receipt of the insurer’s notice of intention to finalise a claim.

(3) To finalise the claim the Injury Management Coordinator must:

(a) review the file;
(b) be satisfied that all outstanding accounts and wages have been processed; and

(c) ensure that the case is recorded as closed on all relevant University information systems.

9 Non-acceptance of claims

Workers’ compensation claims which are not accepted by the insurer will be managed in accordance with the provisions of Part 2 of these procedures. The staff member will receive a notice of declinature from the insurer.

PART 2 – OTHER INJURIES OR ILLNESSES

10 Initial referral

(1) A staff member who requires support for an injury or illness must:
   (a) contact their HR Advisor or Injury Management Services; and
   (b) complete a referral form and provide any relevant supporting documents.

(2) Alternatively, the HR Advisor or supervisor may refer the staff member to Injury Management Services.

11 Assessment of referral

(1) Upon receipt of the referral form the Injury Management Coordinator must:
   (a) acknowledge receipt of the form and supporting documents;
   (b) review the form and documents and formulate an initial plan for supporting the staff member;
   (c) contact the staff member’s supervisor and HR Advisor, in confidence, to:
       (i) obtain a copy of the staff member’s position description;
       (ii) review options for supporting the staff member; and
       (iii) consider whether any further medical information is required.

(2) The Injury Management Coordinator will request a medical consent from the staff member at the time of referral.
   (a) If the staff member declines to provide a medical consent, the Injury Management Coordinator may request the staff member to take relevant documents to their treating medical practitioner for completion.

(3) The Injury Management Coordinator will review the medical and other information and develop a plan for supporting the staff member and managing their continuation in, or return to, work.
12 Return to work

(1) A staff member who requires support for their return to work must provide to Injury Management Services a certificate of capacity from their treating medical practitioner which describes:

(a) the staff member’s capacity for returning to work, including whether a graduated return to work plan is required; and
(b) any support services or adjustments which may be necessary to support the staff member’s return to work.

(2) The Injury Management Coordinator will consult with the staff member and their supervisor to develop a mutually agreed return to work plan, and to obtain the approval of that plan by the staff member’s treating medical practitioner.

(3) A staff member who is not medically capable of performing their pre-injury duties may be assigned alternate duties on a temporary basis to assist with their return to work.

13 Workplace adjustments

If workplace adjustments are required the Injury Management Coordinator, in consultation with the staff member’s supervisor, will:

(a) provide the treating medical practitioner with a copy of the staff member’s position description, role analysis and details of any unique characteristics of their workplace;
(b) review the medical practitioner’s recommendations (if any);
(c) if necessary, conduct a workplace assessment to identify necessary ergonomic or other adjustments which may be required, and
(d) determine if the adjustments sought can be accommodated.

14 Medical assessments

(1) The Injury Management Coordinator will manage referrals for medical assessments, which will be based only on issues related to the relevant injury or illness.

(2) The Injury Management Coordinator will provide the following information to the assessing medical practitioner:

(a) the basis for the referral;
(b) the inherent requirements and demands of the staff member’s position;
(c) an outline of the injury or illness currently affecting the staff member’s ability to perform the requirements of their position;
(d) specific questions relating to the future management of the injury or illness in the workplace;
(e) any proposals to accommodate the staff member’s injury or illness in the workplace; and
(f) details of any previous referrals for treatment for the same injury or illness.
(3) The Injury Management Coordinator will provide the following information to the staff member:
   (a) the reason for the referral; and
   (b) a copy of all information provided to the assessing medical practitioner;

(4) A staff member who attends a medical assessment may be accompanied by a support person and, if required, provided with an interpreter.

(5) The Injury Management Coordinator will provide the staff member with a copy of the report of a medical assessment.

15 Finalisation of cases

Cases will be considered to be finalised and injury management services will cease when:

(a) the staff member:
   (i) has fully recovered; or
   (ii) is fit for normal duties and has achieved a durable return to work;

(b) permanent changes to duties or workplace adjustments have been completed and monitored for a period of four weeks; or

(c) the staff member’s employment is terminated.

NOTES

Injury and Illness Management Procedures 2015

Date adopted: 16 December 2014
Date commenced: 1 January 2015
Administrator: Director, Human Resources
Review date: 1 January 2018
Related documents:

Disability Discrimination Act 1992 (Cth)
Anti-Discrimination Act 1977 (NSW)
Health Records and Information Privacy Act 2002 (NSW)
Privacy and Personal Information Protection Act 1988 (NSW)
Workers Compensation Act 1987 (NSW)
Workplace Injury Management Act 1998 (NSW)
Workers Compensation Dust Diseases Act 1942 (NSW)
Workers Compensation Regulation 2010
**Workers Compensation (Dust Diseases) Regulation 2008**

**WorkCover Guidelines for Claiming Compensation Benefits** - Government Gazette of the State of New South Wales Number 101 Friday, 28 September 2012.

*University of Sydney Enterprise Agreement*

*Disability Action Plan 2013-2018*

*Injury and Illness Management Policy 2015*

*Work Health and Safety Policy 2012*

*Work Health and Safety Procedures 2012*

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**AMENDMENT HISTORY**

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