Disclaimer

This publication contains information regarding workers’ compensation and injury management. It is intended to provide general information only. You should not act or omit to act on the basis of anything contained herein. This brochure should be read in conjunction with the Workers’ Compensation and Injury Management Act 1981. You should seek appropriate legal/professional advice about your particular circumstances.

For more information, visit the WorkCover WA website at www.workcover.wa.gov.au. Workers’ compensation legislation is also available from the State Law Publisher website at www.slp.wa.gov.au.

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An injury at work can have significant consequences for your personal and professional life. Workers’ compensation laws in WA aim to minimise the impact of a workplace injury by ensuring injured workers are fairly compensated while they are unable to work, and assisted in their return to work following an injury.

Your guide to workers’ compensation and injury management

This booklet uses a three-step approach to help injured workers understand how the workers’ compensation system operates in WA, how to best manage their claim for compensation and how to ensure the best possible outcome following an injury.

Additional information and supplementary resources for workers and employers can be accessed from WorkCover WA’s website (www.workcover.wa.gov.au). WorkCover WA’s Advice and Assistance Unit (Tel: 1300 794 744) can also provide further information and clarification on topics addressed in this booklet.
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Roles and Responsibilities

Toolbox: Resources for Workers
1.1 What is workers’ compensation?

Workers’ compensation is financial compensation provided to workers who become injured or ill as a result of their work, and may include compensation to cover loss of earnings, permanent impairment, medical expenses, and workplace rehabilitation to assist them to return to work.

Any worker who suffers a work-related injury or disease requiring medical treatment or time off work is entitled to claim workers’ compensation, regardless of who was at fault.

1.2 Workers’ compensation in WA

The workers’ compensation scheme in Western Australia is administered by WorkCover WA in accordance with the Workers’ Compensation and Injury Management Act 1981 (the Act). The Act has two main purposes:

- ensuring workplace injuries are managed in a manner that enables a worker’s prompt and safe return to work following an injury; and
- ensuring injured workers are compensated for lost wages, medical expenses and associated costs while they are unable to work.
1.2.1 Rights and obligations under the Act

The rights and obligations of employers, workers and other key parties in the scheme are defined under the Act. By law, employers are required to have a current workers’ compensation insurance policy covering all of their workers and a documented injury management system for their workplace. Employers must also ensure, in the event of an injury, that a workers’ compensation claim is managed in accordance with conditions outlined in the Act.

Other key parties in the scheme include insurers, doctors and workplace rehabilitation providers. Each party performs an important role in the workers’ compensation process, working closely with employers and workers to minimise the impact of workplace injuries on all affected parties.

Workers’ compensation insurance

Workers’ compensation insurance protects workers and their employers from the financial impact of work-related injuries by compensating for the costs and expenses arising from a workers’ compensation claim. In the event of an injury, an employer will liaise with their insurer in relation to assessment and management of a worker’s compensation claim. However, there will be occasions where an injured worker may deal directly with the insurer; for example, in relation to medical reviews or payment of medical expenses.
1.3 Am I eligible to claim workers’ compensation?

You are entitled to claim workers’ compensation if you sustain an injury during the course of your work, and you are defined by law as a worker. The definition of a worker under section 5 of the Act includes:

- full-time workers on a wage or salary
- part-time, casual and seasonal workers
- workers on commission
- piece workers

_and in some circumstances:_
- contractors and sub-contractors
- working directors

**Important**

If in any doubt as to whether the terms of your employment cover you for workers’ compensation, call WorkCover WA’s Advice and Assistance Unit for guidance (Tel: 1300 794 744).
STEP 1
Understanding Workers’ Compensation

1.4 How do I make a claim?

To make a claim for workers’ compensation, you will first need a medical practitioner to verify that the cause of your injury is work-related. If your treating doctor determines that your injury is work-related, they will issue you with a Workers’ Compensation First Certificate of Capacity, which will outline the type and extent of your injury, your fitness to work, and any restrictions on work duties as a result of the injury. You and your employer will also need to complete a Workers’ Compensation Claim Form, which will provide details on where and when the injury occurred, the circumstances surrounding the injury and any contributing factors. Both documents are submitted to the employer’s insurer, who will use the information provided to assess your eligibility to access workers’ compensation entitlements. The claims process, including detailed information on how to initiate, manage and finalise your claim, is outlined in Step 2: Managing Your Claim (p.17 – 26).
STEP 1
Understanding Workers’ Compensation

Workers’ Compensation Entitlements

If your claim is accepted, you may be eligible to receive payments to compensate for loss of earnings, medical expenses, vocational rehabilitation, travel expenses and permanent impairment (if applicable).

1.5 General entitlements

Loss of earnings

Payments to compensate for loss of earnings are known as weekly payments; however, frequency of payments may be weekly, fortnightly or monthly, depending on how you are usually paid. The amount of compensation you receive in weekly payments will differ depending on whether you are employed on a full-time, part-time or casual basis, and whether you are employed under an industrial award or not (refer to the table on the following page). It is best to check with your employer or union about the conditions of your employment if you are unsure.

Regardless of your employment and award conditions, weekly payment amounts are capped at twice the average weekly earnings for an adult in WA. These figures are also available from the WorkCover WA website.

Prescribed Amount

Limits apply to the total amounts or value of compensation you can receive for different entitlements over the life of your claim. Maximum amounts are adjusted annually based on the Australian Bureau of Statistics (ABS) Wage Index. For current amounts, speak to your employer’s insurer or see the Prescribed Amount schedule on the WorkCover WA website.
## STEP 1
Understanding Workers’ Compensation

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<th>Workers under an industrial award</th>
<th>Non-industrial award workers</th>
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<td><strong>For the first 13 weeks, you will receive:</strong></td>
<td><strong>For the first 13 weeks, you will receive:</strong></td>
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<td>• the rate of weekly workers’ compensation payments payable under your industrial award; plus</td>
<td>• an average of the payments (including overtime, bonuses or allowances) paid to you over the one year prior to your injury (in the same employment in which you were injured).</td>
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<td>• any over-award or service payment paid to you on a regular basis; plus</td>
<td>• if you have been employed for less than one year, your earnings will be averaged over the period you were employed.</td>
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<td>• any overtime and bonus or allowance. (Overtime and any bonus or allowance paid will be the average earned over the period of 13 weeks to the time of incapacity).</td>
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<td><strong>From week 14 onwards, you will receive:</strong></td>
<td><strong>Your weekly payments will be reduced to 85% of your entitlement.</strong></td>
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<td>• the rate of weekly workers’ compensation payments payable under your industrial award; plus</td>
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<td>• any allowance paid on a regular basis and related to the number and pattern of hours worked; plus</td>
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<td>• any other allowance prescribed by the regulations. (Overtime, bonuses or other allowances are excluded).</td>
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Medical expenses

Medical expenses you can claim under workers’ compensation include:

- first aid and ambulance
- medication
- medical or surgical attendance
- treatment by specialists
- dental
- physiotherapy
- chiropractic
- hospital treatment
- other treatments (including osteopathy, clinical psychology, occupational therapy, speech pathology and exercise-based programs)

If you require further medical treatment after reaching the set limit for medical expenses, you may lodge an application with WorkCover WA for an increase to your entitlement. Your social and financial circumstances will be taken into account when determining your eligibility.

Important

Your employer’s insurer is only required to pay ‘reasonable’ medical expenses up to the medical and allied health provider rates set by WorkCover WA. You should check the fees charged by your medical provider before commencing treatment as you will be responsible for covering any excess or ‘gap’ between these fees and set rates. Current rates are published on the WorkCover WA website.
STEP 1
Understanding Workers’ Compensation

Workplace rehabilitation expenses
You are entitled to claim payments to cover the cost of workplace rehabilitation services if you need assistance with staying in or returning to work following an injury. More information on workplace rehabilitation is outlined under Step 3: Managing Your Injury and Return to Work (p.27 – 30).

Travel and other expenses
You can claim reimbursement for reasonable travel expenses associated with trips to and from your rehabilitation and medical treatments. If you live in a regional area, this entitlement may also include associated meals and accommodation expenses, within reason. You should keep a record and receipts of all expenses to ensure prompt reimbursement. Rates, fees and payments for travel expenses are set by WorkCover WA and available on the WorkCover WA website.
1.6 Compensation for permanent impairment

In addition to the statutory benefits previously outlined, an additional range of benefits, including lump sum compensation payments, are available to workers who sustain permanent impairment as a result of their work-related injuries. Eligibility for compensation, including the total amounts claimable, is based on an evaluation of a worker’s whole of person impairment (WPI - expressed as a percentage) by an Approved Medical Specialist (AMS).

Approved Medical Specialists (AMS)

Approved Medical Specialists (AMS) are medical practitioners accredited by WorkCover WA to evaluate the degree of whole of person permanent impairment (WPI) caused by a work-related injury. WPI assessments are usually conducted only when a worker’s condition has stabilised and is unlikely to change. You are entitled to choose your own AMS for an evaluation. An AMS register, including contact details, is available on the WorkCover WA website.
Exceptional circumstances medical payments

If assessed as having a WPI of 15% or more, you can claim up to an additional $250,000 to cover exceptional circumstances medical payments. This amount is in excess of statutory medical payment entitlements. You should note that if you accept these payments, you automatically waive your right to pursue common law damages.

Specialised retraining programs

If you are unable to return to your pre-injury employment due to the nature and extent of your injury, you can claim payments to fund vocational training or tertiary education in an alternative trade or field of study. To qualify for specialised retraining, you must be assessed as having a permanent WPI of between 10% and 15%.
Settlements

A lump sum compensation payment known as a Schedule 2 settlement is available to workers who have suffered a permanent impairment as a result of their injury. The amount of compensation payable depends on the specific nature and percentage of impairment.

Common Law

In addition to the settlement options available through the statutory workers’ compensation system, you may be eligible to pursue a claim for damages against your employer through the courts if you are assessed as having a WPI of 15% or more, and your injury was caused by your employer’s negligence.
1.7 Other types of compensation

**Noise induced hearing loss (NIHL)**

If you are exposed to noise levels about 90dB(A) or greater over the course of a typical 8-hour workday, your employer must arrange and pay for you to undergo a baseline hearing test within 12 months of your commencing employment. As a guide, 90dB(A) is roughly equivalent to the noise from an idling heavy truck at a distance of one metre. The baseline hearing test establishes your level of hearing when you start a new job. Following this test, you can make a request to your employer in writing to undertake a follow-up test every year.

If subsequent tests show a loss in your hearing of 10% or more, you may be able to claim compensation for noise induced hearing loss. For more information, refer to a guide to Noise Induced Hearing Loss, available from the WorkCover WA website.

*Note: Compensation cannot be claimed for hearing loss which occurred before March 1991.*

**Asbestos-related diseases**

All claims for compensation in relation to pneumoconiosis, mesothelioma, lung cancer or diffuse pleural fibrosis are referred to the Industrial Diseases Medical Panel (IDMP) for determination. The panel operates independently, with WorkCover WA providing administrative support and funding. If you submit a claim for compensation for an asbestos-related disease, your employer has 14 days to notify WorkCover WA. WorkCover WA will refer the claim to the IDMP for determination. WorkCover WA’s Advice and Assistance Unit can provide further information about compensation for industrial diseases.

**Compensation in the case of fatality**

In the case of a fatality of a worker, the family of the worker should seek immediate legal advice.
The Claims Process

2.1 Making a claim

The following steps should be taken following an injury at work:

- Seek first aid immediately, and report your accident or injury in accordance with your employer’s incident reporting policy and procedures.
- Make an appointment to see a doctor of your choice as soon as possible for treatment and assessment of your injury.
- Ask your doctor to provide you with a First Certificate of Capacity.
- Ask your employer for a Workers’ Compensation Claim Form or download a copy from the WorkCover WA website.
- Complete the worker section of the Claim Form and return this, along with your Certificate of Capacity, to your employer. Keep a copy of both documents for your records.

Your employer will need to complete their section of the Claim Form and submit the form, along with your Certificate of Capacity, to their insurer within 5 working days of receiving these documents from you.

A copy of the Claim Form and Certificate of Capacity is included at the back of this booklet.

Important

- You must make your claim as soon as practicable within 12 months from the onset of your injury.
- Keep copies of your Certificates of Capacity and Claim Form for your records and reference if required.
- The first point of contact for any claim specific queries should be your manager or supervisor at work.
STEP 2
Managing Your Claim

2.1.1 Your first medical appointment

You should make an appointment to see a doctor of your choice as soon as possible after an injury. During this appointment, your treating doctor will assess your injury and issue you with a First Certificate of Capacity if they believe your injury is work-related. You should provide your doctor with all information relevant to your injury and ensure that the Certificate of Capacity is completed fully and accurately, as the information provided by your doctor on this certificate can have a significant bearing on the outcome of your claim. The Certificate of Capacity should:

- provide an objective diagnosis of your injury and limitations caused by the injury
- certify your fitness for work and any restrictions on duties you can undertake; and
- outline a plan for future appointments and any other proposed medical treatment.

You will be asked to sign a ‘consent authority’ on the Certificate of Capacity that will allow your treating doctor to discuss the claim and your injury with your employer and their insurer. If this authority is not signed, there may be delays in processing your claim.
2.2 Claim assessment

Following receipt of documentation, a case manager allocated by your employer’s insurer may contact you, your employer and your treating doctor for further information to determine liability and payment entitlements. The insurer has up to 14 days to advise you and your employer of their decision.

2.2.1 While your claim is being assessed

Medical expenses

You are responsible for covering the costs of medical treatment for your injury until a decision regarding liability is made by your employer’s insurer. It is important that you keep all payment receipts during this time. These costs (minus any ‘gap’) will be reimbursed if your claim is accepted.

Optional leave payments

While waiting for a decision on a claim, you may wish to discuss with your employer the option to have your accrued leave, such as annual or sick leave, paid to you if you are unable to work during this time. When considering this option, you should note that:

- leave payments are not an alternative to workers’ compensation
- accepting leave payments is voluntary and will not affect your workers’ compensation entitlements in any way; and
- leave entitlements will be credited back to you if your claim is accepted.
2.3 Claim outcomes

Your employer’s insurer is required to advise you and your employer in writing within 14 days if a claim has been accepted, disputed or is still undecided (pended). The insurer will provide a claim number which should be quoted in all related correspondence. If no response is received from the insurer within 14 days, you or your employer may refer the matter to WorkCover WA to determine liability.

- **Accepted** - Workers’ compensation entitlements commence.
  If your injury prevents you from working, your employer must commence making income replacement payments (weekly payments) as soon as advised to do so by their insurer.

- **Disputed** - No compensation will be paid.
  The insurer will advise you and your employer of the reason. If you disagree with the decision, you should approach the insurer to have the matter heard under the insurer’s internal dispute resolution procedure. You may also apply to WorkCover WA’s Conciliation and Arbitration Services (CAS) for assistance with resolving the dispute.

- **Decision Pended** - The claim is on hold pending further information. The insurer has a further 10 days to make a decision or the claim is deemed to be in dispute, and you or your employer may lodge an application with CAS for assistance.
Worker

- Seeks first aid
- Reports incident
- Obtains a First Certificate of Capacity from a doctor of their choice
- Completes worker section of the Workers’ Compensation Claim Form
- Submits the Claim Form and Certificate of Capacity to their employer

Employer

- Completes an employer report form provided by the insurer
- Completes employer section of Claim Form
- Provides copy of Claim Form and Certificate of Capacity to worker for their records
- Sends Claim Form and Certificate of Capacity to Insurer within 5 working days of receipt from the injured worker

Insurer

Has 14 days after the claim documents are submitted to make a decision on liability and advise the worker and employer in writing if liability for the claim is accepted, disputed or undecided.

Liability Accepted

Injured worker’s entitlements commence, and may include weekly payments, reasonable medical and related expenses, vocational rehabilitation and travel expenses.

Liability Disputed

The injured worker may request an internal review by the insurer or apply to CAS for assistance with resolving the dispute.

Decision Pended

The insurer has a further 10 days to decide the claim. If no decision is made after this time, the worker or employer may apply to CAS for assistance with resolving the dispute.
2.4 Weekly payments

If your claim is accepted and your doctor certifies that your injury requires you to take time off work, you are entitled to receive payments from your employer to compensate for lost income. Your employer’s insurer will calculate the weekly payment entitlements due to you and advise your employer of the correct payment amounts to make. Your employer must commence making payments as soon as notified by the insurer and pay you on your usual payday. Penalties apply for employers who do not make payments on time. See *Loss of earnings* (p.9 – 10) for more information on weekly payment entitlements.

2.4.1 When do weekly payments cease?

Your employer is required to continue making weekly payments to you until advised by their insurer or WorkCover WA. Commonly, payments will cease if and when:

- you have reached the limit on your workers’ compensation weekly payment entitlements (up to the Prescribed Amount)
- you give your consent for payments to cease
- you return to your pre-injury duties with no restrictions
- your workers’ compensation claim is finalised through a settlement; or
- you elect to pursue a common law claim.

In addition, your employer may apply to WorkCover WA to suspend or cease your weekly payments if you:

- do not comply with your Return to Work Program
- fail to attend a medical review arranged by your employer or their insurer; or
- are in prison.
2.5 Medical treatment and expenses

When seeing a doctor or other treatment provider for assessment or treatment, you will usually be required to make payment up front, although some providers may issue invoices for direct settlement by the insurer. Depending on the claims management process agreed between your employer and their insurer, you may liaise directly with the insurer for reimbursement or payment of accounts, or your employer may do so on your behalf. You should clarify arrangements with your employer before commencing treatment.

Remember also to check the fees charged by the treatment provider against the prescribed rates published by WorkCover WA as any ‘gap’ is not payable by your employer or their insurer.

2.5.1 Medical reviews

You have the right to see a doctor of your choice for treatment and management of your injury. However, your employer or their insurer may refer you to an independent medical practitioner for a review or second opinion. An appointment will be made for you by the insurer, and you will be advised of the time and date of the appointment. If you fail to attend this appointment without a reasonable excuse, your ongoing payment entitlements may be affected.

You will not be required to attend a medical review more than once over a two-week period or at any time other than during reasonable hours.
2.5.2 AMS assessments

In some circumstances, you may need to see an Approved Medical Specialist (AMS) for evaluation and further assessment. Evaluation by an AMS may be required if you and your employer disagree on the level of impairment caused by your injury or if you wish to:

- apply for exceptional circumstances medical payments (see page 14)
- make a claim for damages at common law (see page 26)
- access specialised retraining programs (see page 30); or
- seek a lump sum entitlement for permanent impairment known as a Schedule 2 settlement (see page 25).
The majority of workers’ compensation claims conclude with an injured worker’s full recovery and return to work. However, you may be entitled to seek settlement of your claim by payment of a lump sum amount through the statutory or common law systems. Before deciding on a settlement option, you should seek independent legal advice or contact WorkCover WA’s Advice and Assistance Unit for more information.

2.6 Statutory settlements

There are two types of settlements available through the statutory workers’ compensation system:

Settlement by redemption

If you have been receiving weekly payments for at least six months, you may be entitled to settle (redeem) your claim by accepting a lump sum payment negotiated with your employer’s insurer. It is important to note that by accepting a redemption settlement, you will waive your right to pursue any other compensation, including any claim for damages through the common law system (see section 2.7: Common law claims, page 26).

Schedule 2 settlements

Where a work-related injury results in permanent impairment, you can seek settlement of your claim at any time through payment of a set (prescribed) lump sum amount. The amount of compensation payable is based on the specific nature and extent of a worker’s injury or impairment, and is not negotiable. An evaluation by an AMS (see page 24) will be required to confirm the type and extent of your permanent impairment.

Important

Accepting a settlement may affect your other benefits such as Centrelink, tax or private health insurance, so it is important you speak to your benefit providers before making a final decision.
2.7 Common law claims

In addition to the settlement options available through the statutory workers’ compensation system, you may elect to pursue a claim for damages against your employer through the courts. Unlike the ‘no fault’ workers’ compensation system, you must be able to prove that your injury was caused by negligence or other fault of your employer. The following legislative criteria must be met in order to pursue a common law claim:

- **Impairment** – you must have an assessed permanent impairment of 15% WPI or more.
- **Timeframes** – you must lodge an Election to Retain Right to Seek Damages Form (available from the WorkCover WA website) before the ‘termination day’. The termination day is generally one year from the date your claim for weekly compensation payments was made to your employer.

A termination day does not apply if your claim is related to industrial diseases such as asbestos-related diseases, lung cancer or chronic bronchitis.

**Important**

Common law claims are complex and may affect your statutory workers’ compensation entitlements. It is strongly recommended that you seek independent legal advice before electing to pursue a common law claim.

**Resolving Disputes**

If a dispute occurs that cannot be resolved with your employer’s insurer, you or your employer may apply to WorkCover WA’s Conciliation and Arbitration Services (CAS) for assistance with resolving the dispute. CAS provides a fair and cost-effective system for resolving disagreements over workers’ compensation or injury management issues. For more information, refer to the publication *What happens if there is a dispute?*, available from the WorkCover WA website.
Injury Management

3.1 Roles and responsibilities

3.1.1 Your employer

All employers are required by law to have a documented Injury Management System in place to facilitate an injured worker’s early recovery and safe return to work. An Injury Management Coordinator nominated by the employer will have day-to-day responsibility for the Injury Management System and will usually act as a worker’s point of contact during their recovery. In addition to their legal responsibilities, your employer should maintain ongoing communication with you, your doctor and the insurer, and provide you with ongoing support with your claim and injury management.

3.1.2 Your doctor

Following the initial diagnosis of your injury, your doctor will recommend a program of treatment and monitor changes in your condition over the course of your treatment, making modifications to your treatment program as required. Periodically, your doctor will issue you with a Progress Certificate of Capacity and other written notice to keep your employer and their insurer updated on your progress, ongoing treatment requirements and capacity to return to work.
3.1.3 You

Your cooperation with your doctor and employer, and active involvement in the management of your injury will be a key factor in your recovery and safe return to work.

Follow your recommended treatment program

While you are recovering from an injury, it is essential that you see your doctor regularly and follow the program of treatment recommended for your injury. You may also be required to attend other medical appointments as required or arranged by your employer or their insurer. If you are unable to attend an appointment for any reason, ensure that you provide sufficient notice and make alternative arrangements.

Stay active and positive

A positive frame of mind can have a big impact on your healing and recovery. It helps to:

- stay in touch with your work mates
- talk to your manager about alternative suitable duties if your doctor assesses you as partially fit to return to work
- stay active by continuing with your usual activities as much as you can
- accept help from family and friends; and
- focus on what you can do rather than what you can’t do.
STEP 3
Managing Your Injury and Return to Work

Returning to Work

Research shows that an early return to work, even on restricted duties, is an important step in your recovery and the best possible outcome for injured workers. It is important for you to work together with your employer, their insurer and your treating medical practitioner to facilitate this outcome. Your doctor will advise you and your employer when you are able to return to work and any conditions you should observe on your return.

3.2 Maintaining your employment

In some cases, the severity or type of injury may keep you away from work for weeks or even months. During this period, your employer is obliged to keep your original position available for you for 12 months following an injury.

If on your return to work, the position is no longer available or you can no longer perform the role, your employer must provide you with a position that is comparable in status and pay, and that you are qualified and capable of performing. Your employer will consult with you and your treating doctor to decide on appropriate alternative duties.

If your employer wishes to terminate your employment during the 12 month period, they must give you and WorkCover WA 28 days written notice of their intention to do so. WorkCover WA may undertake further investigation to determine if there has been a breach of your employer’s legislative obligations in relation to maintaining your employment.

If you commence another job during this time, you must provide written notice to your employer within 7 days of commencing employment.

3.3 Returning to modified duties

If the nature of your injury is likely to require modifications, restrictions or a permanent change to your duties, your doctor may indicate the need for a documented Return to Work Program. Your employer is required to work with you and your doctor to develop a program with the agreement of all parties.
STEP 3
Managing Your Injury and Return to Work

The Return to Work Program must be in writing and include:

- your name and the name of your employer
- a description of the goal for the Return to Work Program
- the actions to be taken to enable you to return to work and who is responsible for those actions
- a signed statement that you agree to the content of the program.

3.3.1 Approved Workplace Rehabilitation Providers

An Approved Workplace Rehabilitation Provider (AWRP) may assist you and your employer if you have difficulty in identifying suitable duties, or if there are other barriers affecting your return to work. An AWRP is engaged through an agreement between you, your employer and your doctor. Sometimes your employer’s insurer will act on your employer’s behalf. A list of AWRPs is available on the WorkCover WA website or by calling the Advice and Assistance Unit.

Important

If you do not participate in an agreed Return to Work Program, your employer may lodge an application with CAS for an order to reduce or even stop your weekly payments.

3.3.2 Specialised retraining programs

Specialised retraining programs allow workers who are unable to return to their pre-injury employment to undertake formal vocational training or tertiary studies. Specialised retraining is only available if you have an assessment of permanent WPI of between 10% and 15%, and if you have not been able to return to work. You must also meet strict retraining criteria. The Specialised Retraining Assessment Panel will determine your eligibility for specialised retraining.

The entitlement for specialised retraining cannot be redeemed as part of any settlement agreement. If your claim is settled, the retraining program will cease. For more information about specialised retraining programs contact WorkCover WA’s Advice and Assistance Unit or visit the WorkCover WA website.
Injured Workers

Making a claim:

✔ report your injury to your employer immediately
✔ see a doctor of your choice as soon as possible to obtain a First Certificate of Capacity
✔ check with your health provider about charges and any potential ‘gap’ payments, as not all providers charge according to the scheduled workers’ compensation fees
✔ complete the Workers’ Compensation Claim Form
✔ lodge the Claim Form and Certificate of Capacity with your employer; and
✔ attend a medical examination, if requested by your employer, to avoid having your rights to compensation suspended

Injury management and return to work:

✔ participate in your agreed Return to Work Program
✔ carry out the agreed actions as outlined in the program to the best of your ability
✔ immediately inform your employer and/or Injury Management Coordinator if you experience any difficulties carrying out any of the activities in your program
✔ continue to attend progressive medical and other treatment appointments as required
✔ choose an Approved Workplace Rehabilitation Provider if required; and
✔ provide written notice to your employer within 7 days of commencing work with another employer
Roles and Responsibilities

Employers

Following a claim:

✓ submit the completed Claim Form and Certificate of Capacity to their insurer within five working days of receiving these documents from you
✓ provide you with contact details of their insurer if you wish to contact them directly
✓ talk to you about paying any sick, holiday, or long service leave in lieu of your weekly wages while your claim is being assessed and you are unfit for work; and
✓ commence making weekly payments to you as soon as notified by the insurer

Injury management and return to work:

✓ have an Injury Management System in place
✓ work with you and your doctor to develop a suitable return to work program if required
✓ refer you to an AWRP if there is a problem with the return to work process
✓ where reasonably practicable, keep your position available for 12 months following injury
✓ provide you with a position that is comparable in status and pay if you are unable to perform your pre-injury duties; and
✓ give you and WorkCover WA 28 days notice in writing if they intend to terminate your employment
Medical Practitioners

Following a claim:

✓ assess your injury and provide an initial diagnosis
✓ provide you with a completed First Certificate of Capacity
✓ provide advice on work restrictions that may apply to you; and
✓ provide ongoing Certificates of Capacity or other written notice advising your employer of your capacity for work and ongoing treatment requirements

Injury management and return to work:

✓ review your progress on a regular basis and provide a Progress Certificate of Capacity at each review if you are not fully recovered from injury
✓ provide written advice indicating the need for a Return to Work Program if required
✓ work with you and your employer to develop suitable alternative duties that are safe and of equal status and pay; and
✓ provide a Final Certificate of Capacity once you are fully recovered

Workplace Rehabilitation Providers

Injury Management and Return to Work:

✓ undertake an initial assessment; and
✓ discuss findings of the initial assessment with you and your employer and develop a service delivery plan if required
Roles and Responsibilities

Insurers

Following a claim:

- make an informed assessment and decision on whether to accept or dispute your claim
- notify you and your employer of its decision within 14 days of your employer submitting the claim documentation
- keep you and your employer informed of important matters relating to the progression of your claim; and
- provide you with advice and guidance to ensure prompt reimbursement of your claim

Injury management and return to work:

- work collaboratively with you and your employer to achieve positive return to work outcomes; and
- appoint the most appropriate WRP in consultation with you and your employer
### WorkCover WA - FIRST certificate of capacity

#### 1. WORKER’S DETAILS

<table>
<thead>
<tr>
<th>First name</th>
<th>Last name</th>
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</thead>
<tbody>
<tr>
<td></td>
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<table>
<thead>
<tr>
<th>Date of birth</th>
<th>Email</th>
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<table>
<thead>
<tr>
<th>Phone</th>
<th>Mobile</th>
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<table>
<thead>
<tr>
<th>Address</th>
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#### 2. EMPLOYMENT DETAILS

<table>
<thead>
<tr>
<th>Worker’s job title</th>
<th>Employer’s name</th>
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<tbody>
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<table>
<thead>
<tr>
<th>Employer’s address</th>
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</table>

#### 3. CONSENT AUTHORITY

I consent to any medical practitioner who treats me (whether named on this certificate or not) to discuss my medical condition with my employer, insurer and other medical or allied health professionals for the purpose of my claim for workers’ compensation and return to work options.

<table>
<thead>
<tr>
<th>Worker’s signature</th>
<th>Print name</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>

#### 4. WORKER’S DESCRIPTION OF INJURY

<table>
<thead>
<tr>
<th>Date of injury</th>
</tr>
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<tbody>
<tr>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>What happened?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Worker’s symptoms</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>

#### 5. MEDICAL ASSESSMENT

<table>
<thead>
<tr>
<th>Date of this assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<table>
<thead>
<tr>
<th>Clinical findings</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<table>
<thead>
<tr>
<th>Diagnosis</th>
</tr>
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</table>

The injury is consistent with worker’s description of how injury occurred  [yes] [no] [uncertain]

The injury is:  [ ] a new condition  [ ] a recurrence of a pre-existing condition
### 6. WORK CAPACITY

**Worker’s usual duties**

Having considered the health benefits of work, I find this worker to have:

- **full capacity for work** from ____________________ to ____________________ but requires further treatment
- **some capacity for work** from ____________________ to ____________________ performing:
  - pre-injury duties
  - modified or alternative duties
  - workplace modifications
  - modified hours of ________ hrs/day ________ days/wk

- **no capacity for any work** from ____________________ to ____________________ (outline clinical reason below)

**Worker has capacity to:**

(Please outline the worker’s physical and/or psychosocial capacity – refer to explanatory notes for examples. Where there is no capacity for work, please provide clinical reasoning.)

- lift up to ________ kg
- sit up to ________ mins
- stand up to ________ mins
- walk up to ________ m
- work below shoulder height

### 7. INJURY MANAGEMENT PLAN

<table>
<thead>
<tr>
<th>Activities/interventions</th>
<th>Purpose/goal (likely change in symptoms, function, activity and work participation)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tbody>
</table>

I would like:  
- [ ] more information about available duties  
- [ ] a RTW program to be established  
- [ ] to be involved in developing the RTW program

**Examples of injury management activities/interventions include:**
- further assessment - diagnostic imaging, medical specialist consults, worksite assessment
- intervention - physiotherapy, clinical psychology, exercise physiology, prescribed medications, workplace mediation
- return to work planning - identify suitable duties, establish return to work program

### 8. NEXT REVIEW DATE

- [ ] Worker does not need to be reviewed again (FIRST and FINAL certificate of capacity)
- [ ] I will review worker again on ____________________ (if greater than 14 days, please provide clinical reasoning)

**Comments**

### 9. MEDICAL PRACTITIONER’S DETAILS

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Phone</th>
<th>Fax</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

AHPRA no. MED ____________________

Email ____________________

Signature ____________________

Date ____________________

(Practice stamp – optional)
**Workers' Compensation Claim Form**

### Insurer please complete
- **Insurer name**: 
- **Claim number**: 
- **ANZSIC Code**: 
- **Policy number**: 
- **WorkCover number**: 
- **Has employer contacted medical practitioner?** [ ] Y [ ] N

<table>
<thead>
<tr>
<th>Estimated time off work:</th>
<th></th>
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<tbody>
<tr>
<td></td>
<td>□ less than one day</td>
</tr>
<tr>
<td></td>
<td>□ 1-4 work days (inclusive)</td>
</tr>
<tr>
<td></td>
<td>□ 5-9 work days (inclusive)</td>
</tr>
<tr>
<td></td>
<td>□ 10-20 work days (inclusive)</td>
</tr>
<tr>
<td></td>
<td>□ more than 20 work days</td>
</tr>
<tr>
<td></td>
<td>□ fatality</td>
</tr>
</tbody>
</table>

### Employer please complete
- **Name of policy holder/employer**: 
- **Trading as (if different to above)**: 
- **Address**:  
- **Postcode**: 
- **Contact person name**:  
- **Phone No**:  
- **Email**:  
- **Address of injured worker’s usual workplace or base**:  
- **Postcode**: 
- **Major activity of workplace (eg sheep farming, plumbing)**: 

**Date employer received the completed claim form from the injured worker**: 

**Date employer received First Certificate of Capacity from the injured worker**: 

**Date employer sent the claim form and Certificate(s) of Capacity to insurer**: 

### Worker please complete
- **Surname**: 
- **Other names**: 
- **Address**:  
- **Postcode**:  
- **Suburb/City/Town**:  
- **Email**:  
- **Daytime contact phone no**:  
- **Occupation**:  
- **(eg first class welder)**: 
- **Main tasks/duties performed (eg welding of high pressure steam pipes)**: 
- **D.O.B.**  
- **Male [ ] Female [ ]**
- **Preferred language (if not English)**:  

**At the time of the injury I was working as**: 
- [ ] direct employee  
- [ ] working director  
- [ ] contractor  
- [ ] sub contractor  
- [ ] visa worker  
- [ ] employee of contractor  
- [ ] other  
- If other, please specify:  

**If more than one employer, please attach details on separate sheet**

- **Other Employment**:  

### Occurrence details

<table>
<thead>
<tr>
<th>Day of occurrence: (eg Monday)</th>
<th>Time of occurrence: [ ] AM [ ] PM</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of occurrence:</td>
<td>Time of occurrence: [ ] AM [ ] PM</td>
</tr>
<tr>
<td>Did you have to stop working?</td>
<td>If so when? Date: [ ] Time: [ ] AM [ ] PM</td>
</tr>
<tr>
<td>Were you:</td>
<td>Describe the occurrence. Include:</td>
</tr>
<tr>
<td>[ ] working – at your normal workplace</td>
<td>(i) What action was involved (e fall, struck by object)</td>
</tr>
<tr>
<td>[ ] on work break – at normal workplace</td>
<td>(ii) What object/machine/substance was involved (e fumes, door frame)</td>
</tr>
<tr>
<td>[ ] working – away from normal workplace</td>
<td>(iii) The most serious injury or disease caused (e fracture, burn, abrasion)</td>
</tr>
<tr>
<td>[ ] on work break – away from normal workplace</td>
<td>(iv) The bodily location of the injury or disease (e upper arm, eye)</td>
</tr>
</tbody>
</table>

- **Mechanism** | WorkCover WA Staff Only |
- **Agency** | Mechanism |
- **Nature** | Agency |
- **Bodily location** | Nature |

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Toolbox: Resources for Workers 37
Worker please complete

**Occurrence report – Describe how it happened**

- **Where did the occurrence happen?** (e.g., store room, machinery shop)

- **What were you doing at the time of the occurrence?**

- **What were the normal working hours for that day?** Starting time: [ ] AM [ ] PM Finish time: [ ] AM [ ] PM

- **When did you first report the occurrence?** Date: [ ] Time: [ ] AM [ ] PM

- **Who did you report the occurrence to?**
  - Name: [ ]
  - Position: [ ]
  - Phone No: [ ]

- **If you didn’t report the occurrence immediately, please state the reason if any:**

- **Please provide the name and daytime contact phone number of witnesses of the occurrence:**
  1. Name: [ ] Phone No: [ ]
  2. Name: [ ] Phone No: [ ]

**Medical help/history – this occurrence**

- **When did you first seek medical attention?** Date: [ ] Time: [ ] AM [ ] PM

- **If not immediately, please state the reason:**

- **Was the part of the body affected by this occurrence healthy before this occurrence?** [ ] Y [ ] N

- **If not, please give details:**

- **Is the present injury completely related to this occurrence?** [ ] Y [ ] N

- **If not, please give details:**

- **Please give details of any similar injury prior to this occurrence:**

- **Name and contact details of your usual medical practitioner and any health provider who has treated you for a similar injury:**
  - Name: [ ]
  - Address: [ ]
  - Phone No: [ ]

**Other/Previous claims**

- **Are you claiming compensation from any other source?** [ ] Y [ ] N If yes, from whom?

- **Have you had any similar or related workers’ compensation claims?** [ ] Y [ ] N If yes, please give details:

- **Name of Employer:** [ ]
- **Name of insurer (if known):** [ ]
- **Type of injury or disease:** [ ]

**Worker’s declaration**

I solemnly and sincerely declare that each and every answer above and the particulars contained herein or annexed hereto relating to myself and the occurrence are true both in substance and in fact to the best of my knowledge and belief. I take notice that, under the provisions of section 59(2) of the **Workers’ Compensation and Injury Management Act 1981**, I am required to notify my employer in writing within 7 days if I commence work with another employer after making a claim, or while receiving weekly payments of workers’ compensation.

Dated this: [ ] day of: [ ] Year: [ ]

Signature of worker [ ]

Signature of witness [ ]

**Consent authority – to be signed at the option of the worker**

I consent to my employer’s insurer and its appointed service providers collecting personal information, inclusive of sensitive information such as medical information about me and using it for the purpose of assessing and managing my workers’ compensation claim, including determining liability and whether my claim is true. This consent extends to my employer’s insurer disclosing my personal information, inclusive of sensitive information, to other insurers, medical practitioners, rehabilitation providers, investigators, legal practitioners and other experts or consultants for the purpose of assessing and managing my claim. My personal information, inclusive of sensitive information, may also be disclosed as required or permitted by law. I also consent to my employer’s insurer disclosing my personal details to WorkCover WA which is authorised to use this information to fulfill its functions and obligations under the **Workers’ Compensation and Injury Management Act 1981**. I have read all the information on this form regarding the consent authority and I consent to the insurer dealing with my personal information in the manner described.

Signed [ ] Witness signature [ ]

Print your name [ ] Witness print name [ ]

Date [ ] Date [ ]

**IMPORTANT: FAILURE TO PROVIDE YOUR SIGNATURE ON EITHER THE DECLARATION OR THE CONSENT AUTHORITIES MAY DELAY A DECISION BY THE INSURER ON YOUR CLAIM**
WorkCover WA produces a range of publications and other resources to assist employers and their workers in meeting their workers’ compensation obligations under the Act. All publications and forms can be accessed at www.workcover.wa.gov.au or by calling WorkCover WA’s Advice and Assistance Unit on 1300 794 744.

Publications

**Injury Management: A Guide for Employers**
Detailed information, templates and strategies on developing injury management systems and return to work programs in accordance with the Act.

**What happens if there is a dispute?**
A guide to resolving disputes that may arise between the various parties in the workers’ compensation process.

**A technical note on Contractors and Workers’ Compensation**
Detailed information to clarify liability and legal obligations in relation to contractors and sub-contractors.

**Workers’ Compensation: A Guide for Employers**
A comprehensive guide to assist employers with their workers’ compensation obligations in accordance with the Act.

**A guide to Noise Induced Hearing Loss**
Important information for employers and workers exposed to high noise levels in their workplace environments.