

# Workplace rehabilitation

## What is workplace rehabilitation?

Workplace rehabilitation services are needs-based services provided to assist a worker to remain at or return to safe and suitable employment as early as possible. Many injured workers will not require workplace rehabilitation services and can return to work safely with help from their employer and support team, which includes their case manager and treating providers. However, an insurer may still need to engage a workplace rehabilitation provider if the worker's return to work is not straightforward and if additional expertise is needed above and beyond that which the employer and insurer can provide. These services will be engaged if they are reasonably necessary.

As outlined in Chapter 3 of the *Workplace Injury Management and Workers Compensation Act 1998*, the employer and the insurer have an obligation to assist with workplace rehabilitation and return to work, even if liability for an injury is disputed.

This may also include providing rehabilitation services support if needed and is reasonably necessary as per Section 60 (1) (d) of the *Workers Compensation Act 1987*.

## Who can provide workplace rehabilitation services?

Workplace rehabilitation services are provided by rehabilitation consultants who are experienced in delivering services that promote and facilitate a worker's return to work. Most consultants will have allied health qualifications in areas such as physiotherapy, psychology, occupational therapy, rehabilitation counselling, exercise physiology, social work or nursing. All workplace rehabilitation providers delivering services within the NSW Workers compensation system are required to provide services in line with the workplace rehabilitation model and the service provision principles developed by the *Heads of Workers Compensation Authorities Guide: Nationally Consistent Approval Framework for Rehabilitation Providers*. Workplace rehabilitation providers also are required to be SIRA (State Insurance Regulatory Authority) accredited and adhere to the additional guidelines and expectations designed by SIRA.

## Who engages the workplace rehabilitation provider?

A workplace rehabilitation provider can be engaged by any of the relevant stakeholders involved in a claim when it is identified that their services are needed to facilitate a positive return to work outcome for the worker. The services will be arranged by the insurer, who will determine whether the requested services are reasonably necessary, in line with the relevant workers compensation legislation.

## Who chooses the workplace rehabilitation provider?

While a doctor, employer or insurer can recommend a workplace rehabilitation provider, the worker has a say in which workplace rehabilitation provider they use. A worker can request to change or choose their own provider to partner with for their recovery. As some workers may have a limited knowledge of workplace rehabilitation, sometimes more experienced stakeholders will recommend a particular provider to best suit the worker's individual circumstances. They should discuss their recommendation with the worker, so they can be empowered to make an informed decision. If a provider has been engaged but is not the most appropriate provider for the worker's needs, or the worker's circumstances or return to work goal changes, the worker can request to change to a provider that more appropriately meet their needs.

## Who pays for workplace rehabilitation services?

Workplace rehabilitation services are a claims cost and are paid for by the insurer only if they are considered to be reasonably necessary. There may be times when an employer elects to engage a workplace rehabilitation provider as the return to work coordinator/s within their business who is under a work arrangement or contract. In this instance, the employer will pay for the workplace rehabilitation services.

## Is approval required for rehabilitation services?

Yes, pre-approval from the insurer is required before workplace rehabilitation services can commence. The insurer will determine whether rehabilitation services are reasonably necessary for the worker's circumstances.

## What services do workplace rehabilitation providers deliver?

Workplace rehabilitation providers can deliver a range of services. Rehabilitation programs are tailored to the needs of the worker and employer, but may include:

- physically assessing a workplace to determine safe duties for a worker to undertake during recovery, how duties can be modified or whether any equipment will assist a worker in safely returning to their duties
- assessing a worker's functional capacity and providing recommendations on what they can safely do, as well as providing evidence-based recommendations on what a worker can do to increase their capacity for work
- educating workers and employers on the health benefits of returning to work and providing recommendations on how a worker can be accommodated within the workplace while they recover
- providing supportive, educational and motivational rehabilitation counselling to assist a worker to maximise their function and manage any disability throughout the return to work process
- helping a worker identify their vocational strengths, skills and abilities if they are unable to return to their usual role, and assist with identifying steps that can be taken to transition into a different type of work
- identifying resources and programs available to support a worker's return to employment and help stakeholders with accessing these.

## Why is regular communication important throughout a rehabilitation program?

Communication between all parties is important and will continue to occur when a workplace rehabilitation consultant is engaged. Workers should continue to speak with their employer about employment or industrial concerns, seek advice about treatment from their doctor or treatment providers, and continue to engage with their insurer for any approval requests or questions about compensation. While individual stakeholders will have preferences around how they communicate, all stakeholders are expected to work collaboratively and communicate openly to ensure a successful outcome is achieved. At times, a case conference or other stakeholder meeting may be arranged to ensure all parties are working in the best way possible to achieve the worker's goal/s. Engaging a workplace rehabilitation provider does not mean that any other stakeholder becomes less involved in facilitating the worker's return to work.

## What happens if rehabilitation services are not approved and under what circumstances would this happen?

Workplace rehabilitation services may not be approved if the insurer assesses that the services are not reasonably necessary. If rehabilitation services are not approved, an explanation will be provided to the worker and any stakeholders involved. The insurer may also provide guidance on when it may be a more appropriate time to engage rehabilitation services, or what alternative services or strategies may be more appropriate.

## Do workers and employers have to participate in workplace rehabilitation services?

Both employers and workers have return to work obligations to adhere to under the NSW workers compensation legislation, and workplace rehabilitation services are often engaged to help them meet these obligations. These obligations may continue even if liability for the injury is disputed. You should seek specific advice from the insurer in this regard, or if you do not want to participate in a service they can explain the benefits of participating, as well as the consequences should you elect not to participate.

Importantly, employers should remember that they have the obligation to provide an injured worker with suitable duties. This is not necessary if the worker voluntarily leaves employment after the injury, or if they have been terminated for reasons other than their injury.

## What happens if there are concerns around the services delivered by a workplace rehabilitation?

Any concerns or complaints relating to a workplace rehabilitation provider or their services should be raised with the insurer. They will explore your concerns, discuss proposed resolution strategies with the stakeholders involved and discuss the outcome with you. Where appropriate, the insurer may raise your complaint with the workplace rehabilitation provider to request a formal response. In all instances, strategies taken to resolve concerns around workplace rehabilitation service must ensure that the worker's safe return to work is not adversely impacted, and at times this may mean an alternate provider is selected to continue delivering services the worker requires.

## Why might services change or cease?

Workplace rehabilitation services are flexible and tailored, which means the services provided may change as the worker's circumstances change. For example, if there is a change in return to work goal, or the worker requires surgery. As workplace rehabilitation services need to be reasonably necessary, it is the insurer's role to continually re-assess whether the workplace rehabilitation services being provided are appropriate. This process is undertaken collaboratively with the stakeholders involved in the worker's return to work.

Services may stop if there is no longer a need for the additional expertise of a workplace rehabilitation provider and the employer and insurer are now able to manage the worker's safe return to work independently. Services may also stop if they are no longer providing benefit to the worker, or if it is no longer the right time for the rehabilitation intervention. Additional rehabilitation services may not be approved as the most appropriate strategy to assist the worker to achieve their return to work goal if service has continued for a reasonable period with no outcome.

Workplace rehabilitation providers are encouraged to recommend closure of services where they do not consider their services are providing value or it is not the right time for rehabilitation intervention. If a worker continues to have an entitlement to rehabilitation compensation and rehabilitation services are later identified as required, the insurer can arrange for a referral to be made for this.