

Information Sheet W01 Information for workers in Workers Care

Workers Care Program

Welcome to the icare Workers Care Program

Workers Care is an icare initiative to provide the best possible support to workers with severe injuries.

In 2015, the NSW Government made some changes to the NSW Workers Compensation Scheme. This included starting Insurance and Care NSW (icare) to deliver the State's insurance and care schemes. icare acts for the Workers Compensation Nominal Insurer.

icare has started Workers Care to improve the way treatment and care services are delivered to workers with severe injuries.

Who can be part of Workers Care?

To receive support from Workers Care, you must have an accepted NSW workers compensation claim and your injury must meet specific severe injury criteria.

Injuries that meet our severe injury criteria include:

- moderate to severe brain injury
- spinal cord injury
- multiple amputations or specific unilateral amputations
- full thickness burns
- permanent blindness

How will Workers Care benefit me?

We will:

- provide specialised treatment and care services, including a planning process to make sure that you are receiving the best, most appropriate, and most current care available
- provide consistent quality of treatment and care, giving you access to the same range and quality of services as people who are severely injured in motor accidents
- focus on injury management and improved quality of life at home, work, and in the community

What does Workers Care provide?

Workers Care manages your treatment and care services. This is done in accordance with NSW workers' compensation legislation. Your employer's workers compensation insurance agent will continue to manage your weekly payments and all other types of compensation.

We manage and pay for reasonably necessary treatment and care to meet needs related to your workplace injury. Services may include:

- medical treatment such as hospital stays and doctor's appointments
- rehabilitation such as physiotherapy, occupational therapy, and speech therapy
- aids and equipment such as wheelchairs
- · home and vehicle modifications such as ramps and bathroom rails

- attendant care services including personal care, domestic assistance, and registered nursing
- workplace rehabilitation including return to work programs and modifications

All services, apart from your immediate treatment following your injury, require pre-approval by us. Your case manager will work with you to submit the required information whenever you make a claim for treatment and care. Information sheet *WO4: What is reasonably necessary treatment and care*? has details on what reasonably necessary means in the workers compensation scheme.

Who will I be working with?

You will be given the details of a Workers Care contact, who will be your main point of contact with Workers Care. You will always have a contact while you are part of the program. They will work with you, your family, service providers, and others who are involved in your treatment and care.

In the early stages after your injury you may also have a case manager who will be your day-to-day contact person for your treatment and care. Your case manager will work with you, your Workers Care contact, and your service providers to help manage your treatment and care needs. Information sheet *WO3: What is the role of your Workers Care contact and your case manager*? has further details.

How long will I be in Workers Care?

You have been accepted into the program for an initial period of two years. This means that we will manage your treatment and care services for two years. Towards the end of the two years your injury will be reassessed to determine if:

- we will continue to manage your treatment and care for the duration of your claim
- the management of your treatment care will return to your employer's workers compensation insurance agent (who manages all your weekly compensation payments and entitlements)

What happens when I leave hospital?

While you are in hospital your treating team will work with you to develop a treatment plan and provide you with treatment and rehabilitation services. Before you leave hospital your treating team will work with you to identify the treatment and care services you need in the first 16 weeks after you leave hospital. These services will be requested on a discharge service notification form. The treating team will also refer you to appropriate service providers.

If you need help to perform tasks you can no longer do as a result of your workplace accident injuries, the team will work with you to assess your care needs and put in a request for attendant care. Attendant care services include personal care, domestic assistance, and registered nursing. These services must be pre-approved by us.

What about ongoing treatment and care?

Before the end of the 16 weeks your case manager will work with you and your service providers to develop a plan to help identify and achieve your treatment and care goals, including options for returning to work.

It is important to obtain approval from us before any services are organised. Your case manager will involve you in preparing and submitting the request on behalf of you and your service providers or you can submit a request yourself.

We will notify you of our decision about whether we can fund the requested treatment and care services. Information sheet *WO5: How to request treatment and care services* has more information on requesting services.

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