

icare™

# better

2019



## Home automation bridges the gap

How technology is helping Christine live with quadriplegia



## Making icare's services more industry relevant

Changing the way we engage with our customers



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# Continuous improvement is behind icare's success

Message from icare CEO John Nagle

Our customers are the focus of everything we do

icare is a unique organisation. As one of the largest insurance providers in Australia, we cover 310,000 public and private employers and their 3.6 million employees, including builders and homeowners, and protect \$184 billion of the State's most iconic assets including the Sydney Opera House plus schools and hospitals. We provide treatment, rehabilitation and specific care for people severely injured in motor accidents on NSW roads, and support people who have developed a dust disease from occupational exposure. Through our work, we have a deep connection with the broader community and the people of NSW.

The end of the 2017-18 financial year signalled the end of the first phase of our bid to transform icare into an insurer that places its customers at the centre of everything it does. And we've made significant progress, building strong foundational capability, making large-scale changes to some legacy systems and developing our corporate culture and capabilities. We've also changed internally, from a product-focused organisation to one driven by a committed customer focus.

Behind those numbers, however, are the people our organisation has impacted, and I would like to share one or two of those stories here.

Our feature-rich customer portal recently went live, giving our Workers Insurance customers immediate

access to all relevant information. Among the system's many new features, the improvement in the planning and automation of injury management plans is removing a burden for both our customers and teams.

Feedback from our large employers has been positive, noting that access to workers insurance claims is now much quicker and easier, particularly with the ability to upload Return to Work plans (which includes things like recovery goals and suitable work duties).

We've also streamlined claims processing, where no time is lost due to unnecessary processes or forms. This has lifted a large administrative burden from our staff and allowed resources to be dedicated to more value-add activities. The greater visibility of tasks and reporting also gives our claims advisors and case managers more time to support our customers.

We are committed to ensuring our schemes are financially sustainable and have been focused on this from the beginning. In delivering \$367m of operational savings back to the schemes in the first few years of operation, our focus is now on integrating best practice into our operations. This is critical given the uncertain economic climate we are facing and the evolving expectations of our customers and stakeholders.



## We are committed to ensuring our schemes are financially sustainable and have been focused on this from the beginning



icare is not exempt, either, from industry challenges. We operate in a complex and ever-evolving environment, with multiple areas of legislation and regulations to comply with. An ongoing challenge for us is to ensure we meet all of our obligations while making things as easy as possible for our customers.

Adopting evolving technology like cloud computing also helps these efforts, providing access to detailed analytics, speed and flexibility, as well as cost savings. These features in turn help drive better business decisions centred on optimised customer services and stronger customer relationships tailored to individual needs.

We are impacted by wider social changes as well. In the expanding gig economy, it's not only workers who are having to adapt, but those who insure them also. A driver might work for four hours a day and be paid on a part-time basis. Should the worker become injured, icare is still liable for 100 per cent of the risk, with treatment and rehabilitation costs the same for part-time both gig economy and full-time workers. The premium pricing of our schemes has been organised around historical working patterns, meaning we are currently covering more people at work but don't have the same level of premium certainty.

We began our journey to change the way people think about insurance and care back in 2015. We've made significant progress towards that goal, creating a more customer-centric organisation, and been encouraged by the community support given to our social initiatives.

One example of this is the survey and report icare has developed in conjunction with the Menzies Health Institute of Queensland at Griffith University, and the NSW branch of the Shop Distributive and Allied Employees Association (SDA), *Respect and Resilience in Retail and Fast Food*.

Of the 6,000 retail workers surveyed, almost 90 per cent reported having been verbally abused in the past year, while almost a quarter (24 per cent) said verbal abuse happens every week. Fifteen per cent had been physically assaulted.

These are sobering statistics, and as icare's CEO, I am passionate about icare being an active part of the solution wherever it can be. It is clear from the feedback received that customer abuse is impacting retail employees greatly. Like a dripping tap that wears away stone, the change is gradual but significant.

Behind our efforts to reduce those numbers and better protect staff is a story of substantial cost, both personally for affected employees, and financially for their employers. With the average mental health claim costing \$24,000, and such a high percentage of retail staff experiencing some form of abuse, the costs are significant and rising.

icare is working with our employers and business groups on a number of solutions, including staff training to respond to abusive customers in an empathetic but psychologically healthy way. In the coming weeks we'll be collaborating further to develop further proposals and approaches to tackle this issue.



Another example is the icare foundation. Established in 2016, it invests in partners who can improve wellbeing outcomes for our customers and, by extension, the wider community.

In 2017 the foundation launched WorkUp, a \$5 million investment program to support new return-to-work and recovery innovations for injured workers. With 37 active investments and a total commitment of \$35 million, the foundation has had good support from innovators in business and employee groups. With their collaboration, we have been able to design insurance products and operational systems better suited to their needs.

We regularly measure the impact of our funding to ensure we are making the greatest difference possible. We measure project-specific outcomes, as well as our impact across three key areas:

- Are we changing people's lives – reducing injuries on the road or at work, for example?
- Are we helping the system to operate more effectively – how are our funds helping grantees?
- Are we saving the NSW community and the government money – are we operating effectively and efficiently?

We are making steady progress to become the social insurer that actively supports you, and the trusted risk advisor for the NSW Government. We remain committed to listening to our customers, stakeholders and the broader community. Our people are driven by our vision and purpose, while our culture is underpinned by our organisational values – integrity, courage, accountability, respect and empathy. They are important anchors to the decisions we make and the work we do, whether it be working with businesses to improve risk prevention or assisting some of the most vulnerable people in the NSW community.

And we know there's still so much more to do. Our next phase will focus on optimising what we've built and how we work together and with our partners and service providers, to better serve the community and support our people and customers.

We are confident moving into the new financial year that we are working towards our vision of being the state's insurer that brings a commercial mind and a social heart to its operations.





● Buildcorp team with Managing Director Tony Sukkar, centre, site manager David Kemp left and David O'Toole, Manager HSE, second from right.

# Understanding your workers insurance premium

What's in a premium? We explain how it's calculated

**W**orkers insurance is an important part of running a successful business and is a yearly expense. Understanding how your premium is calculated gives you certainty that what you're paying is fair and accurate and will give you the cover you need to keep your people safe.

So, what's in a premium? When calculating premiums, icare considers several factors. These include the industry a business operates in and the types of risks they face. How much a business pays in annual wages is also considered. For a small number of larger employers (known as experience-rated employers), premiums will also be adjusted depending on their safety record, just like any other kind of insurance.

To help keep premiums stable for NSW businesses, icare has maintained the Workers Insurance base average premium at 1.4 per cent of each businesses' wages. This rate has remained the same for the past five years to 2019, despite economic pressures.

While icare works to keep premiums stable and maintain a scheme that's as fair as possible, some businesses may still experience an increase in their premiums from time to time.

This is generally for one of two reasons: their business has grown (and they're paying more in annual wages), or there has been an increase in the number and type of injuries. For experience-rated employers, this can directly impact their premium. To help businesses who have experienced a premium increase, icare has maintained a 30 per cent cap on increases.

Businesses can reduce their premiums by improving their safety record and supporting their injured employees to return to work faster. This also contributes to lower rates for their industry into the future.

icare has been working directly with employers to achieve these goals through a number of initiatives, like the Protect Together injury prevention program and the icare Aware Awards, which recognise those who have made efforts to embed a strong safety culture across their business.

Apart from achieving productivity gains and reduced injuries, winners of the icare Aware Award have been able to keep their premiums relatively low compared to their industry peers.



**icare** | Some key facts about premiums

NSW Workers Insurance premiums - base average of **1.4 per cent** → of wages for the sixth year in a row

Rate stability gives businesses certainty to grow

**30%** cap on premium increases for premiums impacted by claims

3rd year of premium discounts - over **\$300 million** to safe businesses

2017-18 scheme performance discount **\$76 million** in premium savings to **283,000** businesses across NSW

Improved safety record and supporting injured employees return to work faster = lower premiums

**icare programs to help you keep your people safe:**

Protect Together (P2)

icare Aware Awards

icare Speakers Program

**Experience rating is where employers are charged a premium that accurately reflects their risks. Employers' losses are then compared against a group average and rated accordingly**

**Good safety makes good business sense**

Family-owned construction business Buildcorp Group has kept its premiums at 50 per cent below the industry average for the past three years, by making processes safer and developing a culture where their people are encouraged to speak up when something doesn't look safe.

Buildcorp's safety campaign targeting young and new employees has been so successful it has reduced the number of injuries among these new workers to zero and embedded a proactive safety culture across the organisation.

"While we're focusing on ensuring everyone goes home safely every day, we're finding our injury rates are very low in comparison to our industry and this has kept our workers comp. premiums low," says Buildcorp's Manager - Health, Safety and Environment (HSE), David O'Toole.

"Lower premiums allow us to invest in further safety initiatives and helps remind us that we're on the right track when it comes to keeping our people safe and healthy," he added.

At the end of the day, good safety makes good business sense!

For more details, see the premiums page on our website [www.icare.nsw.gov.au/premiums](http://www.icare.nsw.gov.au/premiums)



# Home automation bridging the gap



● Technology keeps Christine connected at home

## Ten years ago, a car accident almost cost 58-year-old Christine Tink her life

In the blink of an eye, Christine went from being a busy, active mum of three running her own interior design business to having a high-level spinal cord injury with no movement or sensation from the chest down.

Christine says the accident left her feeling vulnerable and disempowered. She needed multiple pieces of equipment, including a powered wheelchair, to get around, home and car modifications and 24-hour care and support to live at home.

## Adjusting to life with a disability

Adjusting to life with support workers constantly in her home was challenging for Christine. The environmental control equipment available at the time was basic by today's home automation standards, but she did have limited control of some devices like the television.

"I'm a C4, C5 quadriplegic which impacts everything your body can do," says Christine.

"My fingers don't work, and my thumbs have been forced in under my palm so I can no longer use that grip. Having carers coming and going all the time is something that took me a while to get used to. Your life is no longer your own."

The loss of independence was extremely difficult for Christine and her family, and the significant changes to every aspect of her life required major adjustments.

"I no longer felt I had a role. I was unable to do all the things I'd once done independently, and had to ask somebody to do virtually everything for me. I couldn't answer the phone. I couldn't get into or out of the house. I couldn't do anything for myself, and I couldn't be left alone."

After hearing about new home automation and voice control technology, Christine became curious and contacted her icare coordinator who told her about the new home automation pilot icare was running. Christine was excited to be one of the first Lifetime Care participants to help icare test the technology.

## Home automation

icare is proactive in identifying innovative and emerging technologies that have the potential to benefit our Care scheme participants.

New and improved technologies suitable for the individual needs of people with severe injuries have driven the cost of home automation down significantly, making it more affordable and commercially available.

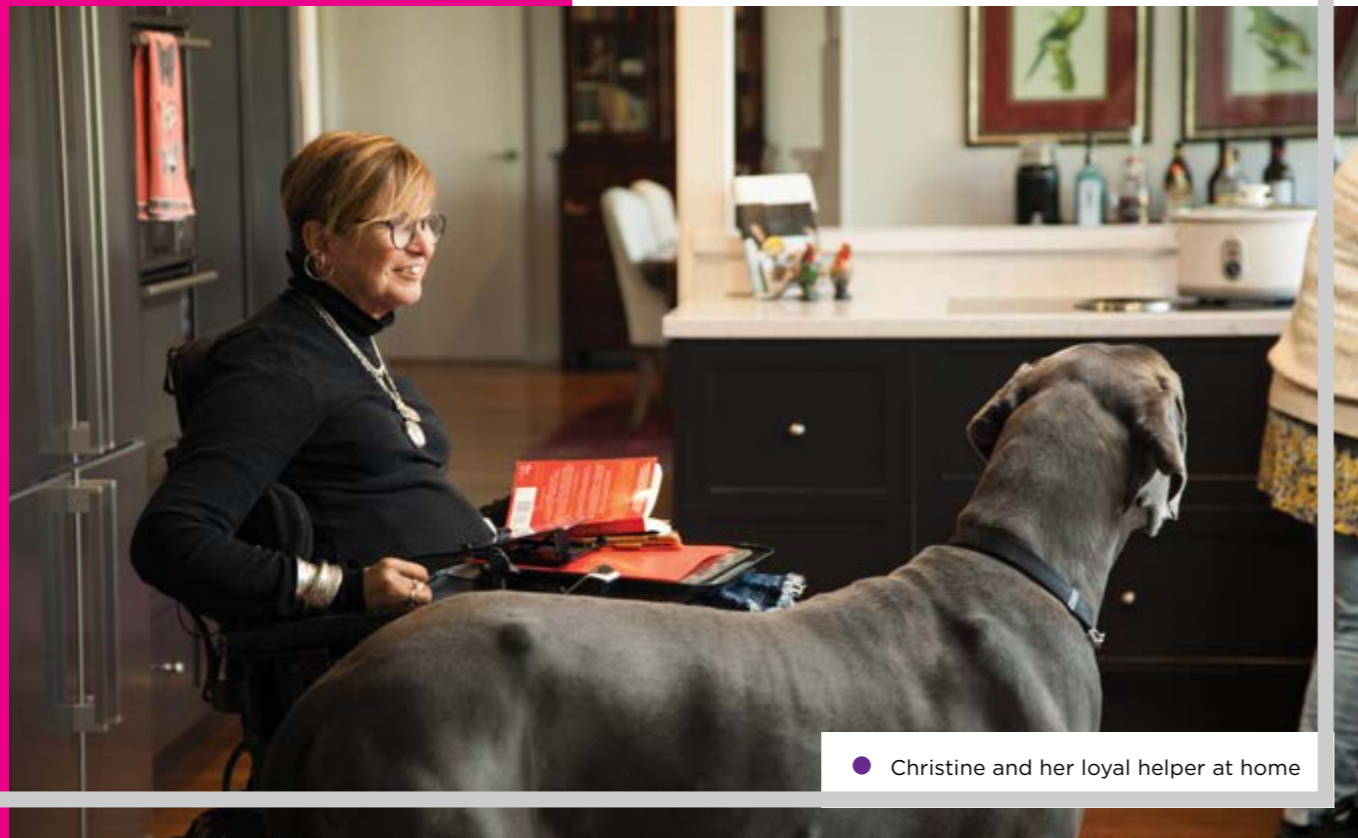
Home automation allows participants with severe injuries to have autonomy and independence in their homes. The systems trialled in the pilot allow multiple integrated appliances and devices to be easily controlled through a single app on a phone or tablet and include voice-activated controls.

## Customisable technology

The technology is customisable to cater for different access needs, like bigger display icons or using a switch to scan and select from a display. It also includes voice control, which is particularly useful when participants are in bed and have more difficulty with their hand functions. Installation is reasonably quick, taking just two to three days and is easy to learn.

The technology is primarily aimed at supporting participants with high-level spinal cord injuries who use powered wheelchairs for mobility and have difficulty with things like reaching, grasping and pressing buttons on household appliances and devices.

Where previously participants may have had limited access to such technology due to the high costs, or had multiple fragmented devices controlling different functions, the system implemented by icare allows easy access to multiple devices around the home through one simple interface.



● Christine and her loyal helper at home



### Discovering new abilities

Christine's fully integrated system now includes control of door openers; a video intercom for the front door; lights; television; music; air-conditioning and heating, and an adjustable bed, all operated through an app on her iPad and iPhone. Voice control is accessible with Amazon Echo and the Alexa voice service. For Christine the changes have been transformational.

"It's a way of bridging the gap between normality and disability. On my iPad and iPhone I can turn on lights all over the house, I can turn the television on, change the channel and adjust the volume. I can turn the heater and air conditioner on, and open and close the front door. I can basically move around the house at will," she says.

"I can now work on my laptop and no longer need someone near me 24 hours a day, seven days a week. I feel like Alexa is my hands in some ways. I use it in the bedroom more because it's a verbal thing. If I'm lying in bed I can't use my iPad as I don't have the strength."



### The impact on daily life

For Christine all of this means that she's finally able to play a more active role in the day-to-day running of her life. It's now been nearly 12 months since her home was automated and she encourages anyone who may benefit from this technology to reach out to their icare coordinator.

"Until you ask the questions you might be surprised at what you can do," she says.

"The impact this technology has is huge," says Liza MacLean, icare Project Manager and co-lead of the home automation pilot.

"It gives participants control and makes them less reliant on other people's support for daily tasks that most people take for granted. People feel more confident, independent and safe being at home on their own."

icare has now completed the pilot and is making home automation available to other participants with severe injuries like Christine.

If you're receiving support from icare and have difficulty controlling your home environment, or you're working with an icare participant who you think is suitable, contact us on 1300 738 586 and we can help to explore home automation options.



● Home automation has allowed Christine to enjoy life to the full





# Screening for dust diseases our clients' experience



- Launching our Dust Diseases Clinic at Pitt St, left to right, Karen Banton and Rod Smith of the Bernie Banton Foundation, Graham Felton, first customer of the clinic, and Christine Callaghan, Interim General Manager, Specialist Care.



## Dust diseases are often contracted in work environments with silica or asbestos dust

**G**raham Felton spent most of his life working as a teacher, but as a young man he completed a five-year apprenticeship in ship building on Cockatoo Island where he was exposed to asbestos.

In 2007, close to his retirement, Graham saw an advertisement alerting workers in high-risk industries to dust diseases. Although he had only spent a short time working with ships and dust many years ago, he knew the risks and contacted Dust Diseases Care to arrange a health check.

Dust diseases usually develop in the lungs. While most symptoms do not develop for at least 10 years after first exposure, some can occur sooner. Graham wasn't experiencing any symptoms but wanted to follow up to ensure he wasn't at risk. He had seen several colleagues develop a dust disease, some of whom have since passed away.

Dust diseases are a group of lung illnesses caused by inhaling certain products when they are in powder or dust form. They are most often contracted in work environments where workers are exposed to or handle products and materials containing harmful dusts like asbestos or silica.

Graham found he didn't have a dust disease but, due to his work with asbestos, had developed pleural plaques, patches of thickening of the lining of the lungs. He continues to get checked regularly to keep an eye on his condition.

Graham has been using icare's health screening service for the past 12 years and is the first customer to be screened at our state-of-the-art Dust Diseases Clinic in Sydney.

The Pitt Street clinic was co-designed with our customers to improve services and support available to the community. It offers a full examination, which includes a chest X-ray or CT scan, a respiratory assessment and a lung function test. Examinations are carried out by a doctor with experience in respiratory medicine. Following the consultation, a report is then sent to the referring doctor.

"I'd recommend the new clinic for anyone thinking about screening. It feels nice and the staff are very warm, which made the experience pleasant," says Mr Felton. Anyone who works or has worked in environments with high exposure to dust should get checked regularly. With early detection and diagnosis, icare can provide support and compensation.



# More support for brain injury patients

icare's psychiatry fellowship is an Australian first



In an Australian first, icare has partnered with the University of Sydney's Brain and Mind Centre, the Royal Australian and New Zealand College of Psychiatry and the Northern Sydney Local Health District to establish three psychiatry fellowships in brain injury for advanced trainees. The Fellowships have been funded by the icare foundation with \$1.5 million over three years.



"Mental health conditions are commonly experienced by people with brain injury and can often require specialist management. There are only a very small number of psychiatrists in NSW who specialise in this clinical area so we're hoping to change that," says Suzanne Lulham, General Manager Care Innovation and Excellence, icare.

Until now, there hasn't been any specialist fellowship training available for psychiatrists in the area of brain injury in Australia. Looking to address the complex behavioural and mental health needs of participants with brain injury and to support them in their rehabilitation and reintegration into the community, icare approached RANZCP on how to increase mental health support for brain injury patients.

Seventy per cent of icare's Lifetime Care participants have a brain injury and 50 per cent of those have a mental health condition.

"We want to be able to address complex behavioural and mental health needs and optimise the lives of participants with brain injury. The aim is that we will be able to support them as they go through their rehabilitation and reintegration into the community," said Ms Lulham.

Our first Fellowship recipient, Dr Jodi Cartoon and supervisor Dr Ralf Ilchef, spoke to *Better* recently.



● Dr Jodi Cartoon,  
Senior Psychiatry Registrar,  
Sydney University



● Dr Ralf Ilchef  
Clinical Senior Lecturer,  
Sydney University

## Dr Jodi Cartoon, Senior Psychiatry Registrar

**You're the first psychiatry registrar to go through this Fellowship. What inspired you to pursue this field?**

I've trained in a variety of workplaces and have found inherent gaps in the system, which means that the mental health needs of certain populations aren't adequately met. People living with brain injuries are one of those groups. Their presentations cover various medical domains and their management requires a level of expertise not commonly available. I'm particularly interested in the interrelation of psychiatric disorders and neurology. This fellowship affords the rare opportunity to develop skills in neuropsychiatry, with a special focus on the important and under-resourced area of brain injury psychiatry.

**What difference will this makes to patients' lives?**

Despite the already ample resources dedicated to their care, many of the patients we see fail to optimally progress their rehabilitation due to the significant psychiatric morbidity associated with their condition. Timely psychiatric intervention can help these patients more readily get back to social and occupational functioning and improve the quality of life for them and their families.

**What are you hoping to get from the Fellowship?**

In the relatively short time I've been in the Fellowship position I've become integrated with multidisciplinary teams caring for people with brain injuries in acute and rehabilitation settings. I've started to gain an appreciation of the excellent service provided and the ongoing challenges faced, often due to psychiatric and behavioural difficulties. I've begun to see the difference timely psychiatric interventions can make and have received guidance and advice on how to provide this from existing experts in the field. I look forward to further developing my skill set in the area and to contributing to better outcomes for people with brain injuries and their families.

**What's the long-term plan?**

icare is generously investing in myself and future Fellows to increase clinical skills in brain injury psychiatry, with the long-term plan of creating skilled specialists to meet current needs. This is alongside a research component that will explore gaps in the knowledge of relevant clinicians and families around how to identify and manage psychiatric presentations in people with brain injuries and provide guidance on referral pathways.

## Dr Ralf Ilchef Clinical Senior Lecturer

**This fellowship is an Australian first. Tell us about the inspiration behind it.**

Having worked in the area for 20 years I've been struck by the very limited resources available to brain injury patients with psychiatric and behavioural issues, and the difficulty in coordinating their care with mental health services.

The Fellowship was established as a good way of attracting interested registrars who have almost completed their training. No similar program for training psychiatrists in the management of brain injury exists in Australia. In fact, while it's likely that such programs exist overseas, I've not come across anything comparable in the international literature.

Traditionally these cases have been treated in an ad hoc, case-by-case, relationship-based manner. Some services – for example, Royal Rehab in Sydney – have good links with psychiatry, while others don't at all, and the problem is often passed back to GPs or allied health professionals.

**Why is there a need for this sort of specialist?**

A very significant proportion of patients with severe traumatic brain injury have psychiatric and behavioural problems. Many professionals can be helpful in managing these problems, but there is a specific role for a psychiatrist with experience in treating this population, especially around assessing severe depression, suicidality, psychosis, marked apathy and problems with aggression and inappropriate sexual behaviour.

The Fellowship is designed to train a senior psychiatry registrar in assessing and managing the psychiatric and behavioural consequences of brain injury. Our aim is to eventually have a coordinated network of brain injury-trained psychiatrists who are accessible to clinicians across NSW.

**How important is the partnership with icare?**

icare's contribution has been absolutely vital. There was no prospect of this project taking place without its wholehearted support. They have been a wonderful organisation to be in partnership with.

**Delivering optimal care**

The Brain Injury Psychiatry Fellowship goes beyond the training of registrars in brain injury psychiatry to educating family members of people with brain injuries, as well as upskilling clinicians in the field. The areas identified as requiring more training will be addressed in a workshop available to icare case managers in the first instance, and more widely online at a later stage. In addition, we're planning to create a guide to assist in determining when and how to refer to a brain injury psychiatrist.



# A better customer service experience

Every year about 100,000 people in NSW are injured or become ill at work

Fortunately, most incidents are minor, and most people recover quickly and return to work within days. However, for those people who sustain a more serious injury, recovery and return to work isn't always straightforward.

Injured worker recovery rates impact employers, the worker and their co-workers in different ways, and we are seeing better return-to-work outcomes achieved with greater engagement backed by improved systems and processes.

Claims management practices are evolving to accommodate the needs of both employers and injured workers. This means each party has an active role to play: the employer, the healthcare provider and the injured worker, supported by icare's claims management team who can help find the right path to recovery and return to work.

**Maxine Burns is a Case Management Specialist with icare, responsible for helping people recover from with workplace injuries ranging from fractures and sprains to lacerations and burns. For a behind-the-scenes view, we asked Maxine to recount a typical day's work as a case manager.**

My first incoming call of the day is from Steven, a small café owner in Sydney. I'd contacted Steven the previous day about one of his kitchen staff, Jim, who had sustained lacerations to his hand while using a vegetable slicer.

Steven had lodged the injury notification online and, given the nature of injury, the case was directly allocated to me. Based on the treating doctor's description of the injury and Steven's information about how it happened, I then take a decision to either accept or deny the claim, apply 'reasonable excuse' if relevant or accept provisional liability.

In Steven's case, it is appropriate to accept provisional liability. This can be a confusing term as it doesn't mean we are accepting liability. It's more accurate to say 'provisional payments'. What it means in practice is that we, the insurer, can start funding medical treatment and begin making payments to cover the worker's wages while they're off work while a full liability assessment takes place. This is really important in helping recovery, as we know the quicker people can access treatment the faster they recover. This also ends up costing employers less in premiums in the long run.

Following an injury or illness, there can be a lot of uncertainty. People want to know what's going to happen next. I explain to Steven how the insurance works, what each person's role is and what to expect over the coming days (or potentially weeks). This is at least a starting point and gives Steven some reassurance and peace of mind.

While Steven is concerned about Jim's injury, he's also worried about

the possible impact the incident may have on cash flow and whether the claim will increase his insurance premium next year. In this instance, I was able to tell Steven that because his business pays less than \$30,000 in annual wages, his premium will not be affected.

I was also able to reach Jim, who had just returned from seeing his local GP. After visiting the emergency department of the local hospital the previous day, Jim had given Steven the medical certificate provided by the hospital.

Jim was worried about his immediate finances as he was out-of-pocket for the GP consultation and medication. I was able to reassure him his costs would be covered. I advised him to take a copy of the receipts and send them either to Steven or directly to icare using the online portal.

Like all case managers, I'm the central point of contact and it's critical that I have all the available information and a clear understanding of each situation. On any normal day, I speak to around 40 people regarding the 60 to 70 claims I manage at any one time. I have conversations with lawyers, doctors, workplace rehabilitation providers, employers and brokers, and, of course, injured workers. I'm constantly working to ensure all parties are up-to-date with the person's recovery and progress of the claim.



Helping and guiding people is personally very rewarding. When you can give an injured worker or an employer clarity and reassurance, you know you're making a real difference to someone's life.

In managing a claim, one of my first actions is to prepare an Injury Management Plan, which serves as a central reference and communication tool for all parties. As an injured worker receives treatment and recovers, the plan is updated based on information provided by the worker, employer and treating doctor, and if required, other specialists or examiners. I rely on this information to take decisions and inform all parties of any changes along the way.

Given this was my first conversation with Jim, I also took the opportunity to explain the claims process, ask him a couple of questions and check whether he had any concerns. Jim said his doctor had referred him to a hand specialist because of likely damage to ligaments surrounding the thumb. Jim wanted me to extend the estimated return-to-work date by an additional two weeks. Explaining to Jim that such decisions need to be made based on direct medical diagnosis and treatment plans, I told him I would contact his GP and, if necessary, the hand specialist for guidance.





One of the more challenging aspects of my role is managing situations where there is doubt or conflict about the circumstances of a claim. In managing the situation, I need to adhere to the workers insurance legislation and the regulatory guidelines. This often means I spend time advising people about what I can and can't do, and the reasons for my decisions and actions. To be fair to all parties I must balance the needs of everyone involved, ensure that decisions are taken efficiently so that unnecessary delays are avoided and keep everyone on track to get the injured worker back to work at the right time.

Noting the update from Jim in the system, I also log a personal reminder to call his GP and Steven by midday. Being transparent with information goes a long way towards preserving the worker/employer relationship and helps smooth any return-to-work obstacles.

Next on my 'to do' list is a series of 15 follow-up calls to employers and injured workers to check in and respond to their enquiries. But before I can get started, an awaited call from a GP Practice Manager comes in ... it's a tough balance.

### Continually improving

**Beth Uehling, Group Executive Personal Injury, tells *Better* about recent enhancements to icare's customer service delivery model**

Regular feedback from employers, brokers and industry representatives on our claims management and the services we provide continues to shape and refine our operations.

Customers have told us they want better communications, faster processes, more effective rehabilitation and services that cater for different business and industry environments. To date, we've made improvements to our technology platform and data collection and reporting, and we're continually raising the bar on customer service.

Many customers I speak with raise concerns about the service they may have received from our service providers, or would like to flag an issue important to them with me. Mostly, I hear directly from injured workers because of actions taken or not taken by the providers. The most common concerns relate to either not knowing what was happening with a decision, or not understanding the reasons behind decisions taken.

Beth Uehling, Group Executive Personal Injury, tells *Better* about recent enhancements to icare's customer service delivery model



People really appreciate that I can get back to them and help them understand where things are up to. Key to resolving things is listening to ensure I understand and following up on individual claims with the right icare manager. Our business is about people interacting with people and ensuring we have the right technology to support that.

I also spend time listening to large employers' views on how claims are being managed in the Workers Insurance scheme and try wherever I can to seek positive outcomes. Recently I met with a large employer group, and a key concern of theirs was our claims management practices which are not always up to scratch. In some cases, this is leading to delays in workers receiving medical and rehabilitation services and returning to work. I'm confident our new claims management platform, which went live earlier this year, will begin to deliver improvements in this space. The platform gives our customer-facing teams and service partners better visibility of customer policy information, interactions and claims activities.

Previously our teams were relying on legacy systems that had limited functionality. The new system is designed to speed up the preparation of injury management plans and automate simple processes and administrative tasks.

We're also piloting an Authorised Provider service model with Allianz, an exciting new concept that provides large employers with flexibility and a choice of provider. This is an extension of the icare claims system, with added-value services tailored to each employer's needs. As part of our commitment to listening to customers, icare is using the pilot period to inform the final design and delivery of the Authorised Provider model.

New Customer Policy and Claims portals for employers and injured workers will also be introduced over the coming year. Customers will be able to log in securely, track the progress of their claims, upload documents and communicate with icare or an icare service provider on matters relating to a policy or claim.

These services and solutions plus a steady program of improvements will continue through the 2019-2020 financial year to ensure icare delivers an effective and sustainable claims management service.

● **Beth Uehling**  
Group Executive Personal Injury Claims



# Getting the prescription right for injured workers

Getting back to work is a critical part of treatment for work-related injuries



● Dr Chris Colquhoun  
Chief Medical Officer

Each year approximately 36,000 workers insured through icare sustain a work-related injury or illness that results in time off work. Most will return to work within a few weeks but those who spend longer out of the workforce face significant risks. icare's Chief Medical Officer, Dr Chris Colquhoun, discusses how medical tests, treatments and prescriptions, and sometimes not intervening in conventional ways, can support workers to recover at work.

The twenty-first century focus on data has impacted the world of workers compensation just as it has other areas of the economy and society. Data and research have overturned the accepted wisdom of previous decades – that an injured worker should not go back to work unless completely fit to perform all aspects of the job.

We now know that rather than hampering recovery, getting back to work is a critical part of the treatment for work-related injury and illness.<sup>1</sup> Not returning to work can lead to depression, isolation and poorer health, including greater risks of chronic disease and mental ill-health.<sup>2</sup> We also know that the longer someone is off work following an injury, the less chance they have of ever returning. The likelihood of returning to work is 70 per cent after 20 days, 50 per cent after 45 days, and just 35 per cent after 70 days.<sup>3</sup>

icare supports an evidence-based path to recovery from work-related injury or illness. Our understanding of best practice is constantly evolving in all aspects of medicine as new discoveries and advances are made.

One of the most common injuries we see in workers compensation is non-specific lower-back pain, something that an x-ray, CT or MRI scan became a standard test for. These tests can be the beginning of what University of South Australia Chair in Physiotherapy and Professor of Clinical Neurosciences, Lorimer Moseley, refers to as the 'tragic pathway',<sup>4</sup> where a simple trip to the GP for back pain leads to invasive surgery and reliance on pain medications.

We now know that 'abnormalities' identified in scans for non-specific lower-back pain are often normal body changes. We also now know that many cases of lower-back pain will resolve themselves and that maintaining movement, rather than rest, will assist in recovery.

Chronic pain is often at the heart of work disability and one of the big risks for injured workers in these cases is the overprescribing of tests, treatments and medications.

Research shows that opioid use beyond the acute phase of an injury can impair function, be a barrier to recovery and actually increase a worker's experience of pain rather than diminish it.<sup>5</sup>

There is now significant evidence that psychological and social factors can have as much, sometimes more, impact on return-to-work outcomes as biological factors. This means that the worker's psychological response to injury (their beliefs about pain or expectations of recovery) or the level of social support provided by the employer, can be more important predictors of the rates of return to work than the type and severity of the injury itself.

According to icare data, the injuries with the most variable expected rates of return to work include psychological injury, anxiety disorder, sprain of the knee or shoulder joint, sprain of the ligaments of the cervical spine, and low back pain.<sup>6</sup> These injury types are where psychological and social factors have the greatest impact on sustainable return-to-work outcomes.

Our approach is to track all risk factors – biological, psychological and social – and intervene as early as possible to help the injured worker's recovery stay on track.

While over-prescription is ultimately the responsibility of medical practitioners, a recent Australian survey demonstrates that patients, too, play a role. The survey identified patient expectations as the reason most commonly given by GPs (54 per cent) for overprescribing tests, treatments or drugs; specialists too (42 per cent) commonly cited patient expectations as a reason for overprescribing.<sup>7</sup>

In a number of cases, these interventions result in reduced function, poorer quality of life and increased drug dependency.

On the treatment front, icare is pursuing more evidence on the effectiveness of promising alternate pathways to recovery and sustained return-to-work outcomes. This includes investment through the icare Foundation in the following initiatives:

- *Social Prescribing*: Run by the Primary & Community Care Services department, this pilot is testing the impact of healthcare and other providers 'prescribing' non-medical interventions (e.g. men's sheds, financial management classes) that encourage social participation.

- A commitment of \$5 million towards initiatives which support employers, doctors, insurers and training providers to work together to overcome barriers to employment.

We will evaluate these pilots for their success in improving recovery and return-to-work outcomes and their ongoing financial viability. Based on results, we may incorporate them into icare's case management practises in future.

It is not icare's role to recommend medical treatments to injured workers – this is the role of trusted medical professionals. What we can do is help our customers actively participate in their recovery, including asking questions about the treatments they are being recommended and when recovery at work is part of the prescription.



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# Turning insight into action

icare is a social insurer. We protect, insure and care for the people, businesses and assets that make NSW great. As our name makes clear, we care, and all parts of our organisation are dedicated to realising that mission

One of the key departments improving our customers' interface with us is the Employer Engagement division in Workers Insurance. It's headed by Geoff Henderson, who brings 25 years' experience in insurance and reinsurance to icare. His department is responsible for the key initiatives we take to improve our service, so our customers can enjoy their interactions with icare and enjoy better outcomes.

*Better* sat down with Geoff recently to find out more about how icare tracks, gauges and applies our customer feedback.

Since its formation, icare has had many ways of capturing feedback from our customers. Some would say it's been the cornerstone of our continuous improvement journey.

In March 2016, icare commenced the Net Promoter Score (NPS) program. The most visible of its programs, it captures verbatim employer feedback and is a key metric of the customer experience. Over the last three years, icare has sent over 400,000 survey invitations and received over 50,000 responses. These responses score not only customer sentiment about our performance but provide valuable verbatim feedback around what's working and what's not.



● **Geoff Henderson**  
General Manager, Employer Engagement Injury Claims, Workers Insurance



**While our customer feedback has been telling us you understand the change we're going through and that in times of change you don't expect perfection, you're also telling us we've got to get better, and fast. We hear you**

Our Policy and Billing call centre also offers an 'at the coal-face' view of customer satisfaction, which allow us to understand the level of service we're providing, together with our customers' expectations. Averaging a constant score of 4.8 out of 5 since the call centre opened, icare uses the data to ensure our services are tailored to customer needs.

There are other ways we engage with our clients. Rather than wait for customers to come to icare, the Mobile Engagement Team and Community Impact Team go to our customers.



In a world rapidly changing, icare also mines insights from its digital platforms. Using web analytics driven by our data experts we track how often our website is visited, page by page; what and how many pdfs are downloaded; the most popular sections by pageviews, and traffic sourced by major cities. We graph how often each scheme page is visited, the referring domains and the predominant translations needed (Simplified Chinese is the most popular, followed by Hindi, Traditional Chinese and Korean); as well as the popularity of our Facebook, LinkedIn, Twitter and Instagram posts. We track complaints submitted by scheme, click and bounce rates; new and returning visits and task-based navigation performance. We also monitor our own performance (key in the word 'complaints' in our search function and you'll find a raft of ways you can let us know we didn't measure up).

**“Knowing the changes we are undertaking are making a difference – this keep me coming back.”** Geoff Henderson



icare's Mobile Engagement team ensures we reach employers, brokers and industry associations 'on the ground', particularly those outside the major cities. The team engage regional and country areas with updates and information on upcoming changes, and insights on the best way to work with the Workers Insurance scheme. Most importantly, they're good listeners.

The unique space our Community Impact Team operates in, not only across icare's business lines but also in the communities, cities and towns of NSW, means their support initiatives reach a wide audience. Their regularly updated news, blog and Deep Dive workshops touch not only icare's immediate customer base, but also potential customers, scheme participants and injured workers' support networks.

**Our commitment to employers: we will provide fair, transparent and accessible service focused on continual improvement**

However, insight without action is only half of the story. To ensure our service is informed by your needs and requirements, we've changed our ways of working to be more collaborative and customer-centric. A number of co-design opportunities have been launched, as icare delivers a more customer-focused service. The redesign of the large employer offering (the Loss Prevention and Recovery product) was one of the first initiatives to use this approach. And while the co-design of service models like MyCover (an initiative to be launched later this year covering travel, certificates of currency for government agencies) is in the Insurance for NSW portfolio, it serves to showcase how this approach is used across icare.

Not everything we try works, and we recognise that improving our performance across the board is a continual work in progress.

Workers Compensation is a complex environment and opportunity exists for improvement amongst the complexity. Working with the Scheme Insights, Mobile Engagement and Community Impact teams, Employer Engagement brings this 'voice of the employer' together with icare's CX Design, Product and Personal Injury Claims teams to look for service improvement opportunities or service enhancements. Through this we close the loop on feedback.

Asked to name something he's most proud of, Geoff nominates our NPS scheme's increasing sophistication.

While some companies choose not to forward surveys to disgruntled customers, with icare, everyone gets a say, and everyone's opinion is analysed. Over the three-year period since icare's inception, Geoff has seen a steady upward trend in NPS scores, indicative not only of a significant change in customer sentiment but of the positive impact of the changes icare has instituted.

"I'm excited about the next 12 months because we're going to make some big steps forward in looking after our employers. We'll be delivering key pieces that have been lacking such as Employer Training.

"Enhanced claims reporting is also on the horizon for our customers to monitor their claims, understand injury trends and project premiums. And with the development of customer portals, this information will be increasingly available on demand."



## ✓ Reducing the impact ✓ of customer abuse

### Respect and resilience in the retail and fast-food industries

Most of us are retail trade customers every day when we purchase goods and services from businesses, ranging from the café where we get our morning coffee to the supermarket where we do our weekly shopping or the supplier we go to when our car tyres need changing.

And every day workers in these businesses are experiencing the impact of dysfunctional customer behaviour, an issue identified as growing in prevalence and contributing to workplace injury, higher rates of absenteeism and increased staff turnover.

The Shop, Distributive and Allied Employees' Association (SDA) NSW Branch's annual member survey found that over 85 per cent of members had experienced verbal abuse from a customer in the previous 12 months, 15 per cent had experienced physical customer violence and 11 per cent sexual harassment or abuse.

"In response to the growing concern of dysfunctional customer behaviour, we've partnered with the retail trade industry, the SDA and Griffith University to understand more about how businesses can prevent such incidents and respond more effectively when they do occur," said icare Chief - Customer and Community Sara Kahlau.



● Sara Kahlau  
Chief - Customer and Community

The initial findings of the Respect and Resilience in Retail and Fast-food project<sup>1</sup> listed four strategic directions for intervention to both support better customer experiences, reduce the opportunity for complaints, and support employees to have the skills to respond should incidents occur:

1. Modifications to physical elements of the workplace
2. Increased workplace support
3. Specialised and focused customer-service training
4. Incident reaction training

"The findings also highlight the few rigorous studies done on specific interventions focused on reducing dysfunctional customer behaviour," said Ms Kahlau.

"Together with our customers and Griffith University we're conducting a series of innovative trials to fill this knowledge gap. One of the businesses participating in the trial is discount retailer, The Reject Shop."

*Better* spoke to The Reject Shop about why they decided to participate in the Respect and Resilience in Retail and Fast-food project.

"The Reject Shop has a strong purpose in serving our customer needs. We value our team and our customers, and constantly seek to ensure an exceptional shopping experience."

"At times however, our team has sometimes borne the brunt of dysfunctional third-party behaviour which has placed the wellbeing of team members at risk. We note that this trend of aggression and anti-social behaviour is emerging as a broader community issue that impacts multiple industries and workplaces beyond The Reject Shop."

"The Reject Shop has a history of contributing proactively to broader retail safety knowledge through networking programs and via collaboration with state-based regulators. The opportunity to partner with icare and Griffith University on this ground-breaking research will help us better protect our team and customers and support the broader industry."

"We are excited about the opportunity and the value that the Respect and Resilience in Retail and Fast-food project offers. The research aims to prove that there are positive ways to prevent incidents, as well as provide de-escalation training for front-line team members and store managers, and to ensure we are best-positioned to support team members who are exposed to dysfunctional behaviour."

At icare we believe injury prevention is good for employers, their workers and their customers. We look forward to sharing the results of the intervention trials at The Reject Shop and other participating retail employers throughout 2019.

### >>> What is dysfunctional customer behaviour?

Dysfunctional customer behaviour refers to the spectrum of negative acts directed at service employees, including incivility, verbal abuse, physical aggression and violence. These behaviours can have adverse consequences in the short and long term for psychological wellbeing, physical health and work attitudes and performance. Motives for dysfunctional customer behaviour usually include gaining esteem, revenge, and/or financial benefits.



Figure 1. The spectrum of dysfunctional customer behaviour encompasses low to high intensity acts.

1. Respect and Resilience in Retail and Fast-food [www.icare.nsw.gov.au/about-us/publications/](http://www.icare.nsw.gov.au/about-us/publications/)



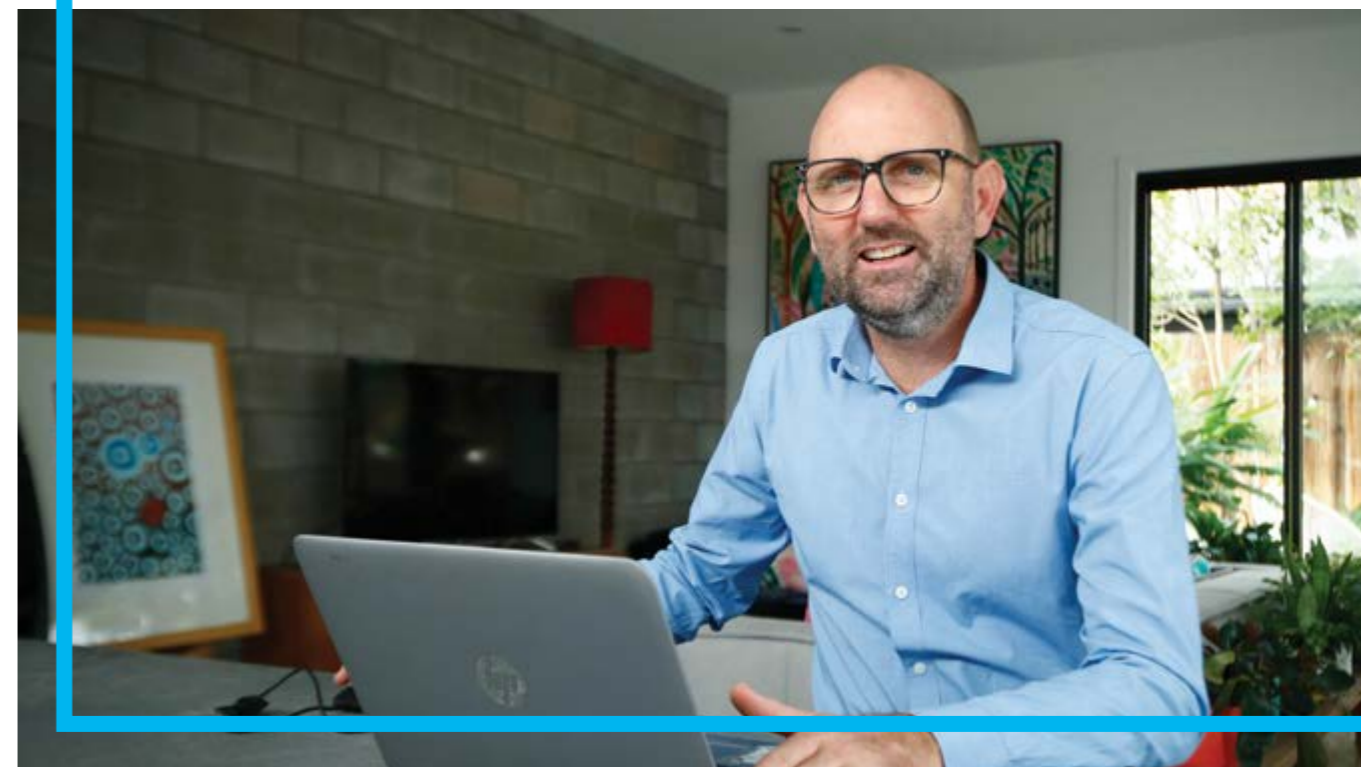




# icare out and about

icare's **Mobile Engagement Team** ensures we reach all our customers, particularly those outside the major cities

● Relationship Manager  
David Huxley at work



## Better recently spent a week on the road with them, where David 'Hux' Huxley, Relationship Manager, told us what's great about his job

A large part of what I and the Mobile Engagement Team do is to provide regional communities with updates on recent scheme changes, and education on how to work with the Workers Insurance Scheme.

As well as being the human face of icare, perhaps the most important thing we do is simply listen. Listening is the first step towards developing longer-term solutions for our customers, while at the same time building trust and respect between icare and our stakeholders.

There's something meaningful about meeting customers face-to-face in their community. You get a different perspective, and an appreciation of local challenges that are often unique to the area.

An example of this is a recent trip to Moree I took, where I unexpectedly met with around 40 farmers' wives or their daughters. It was a Wednesday, so all the men were at the cattle sales, being the day the weekly sales are held.

Meeting with the local women in their community opened my eyes to some of the challenges they face, challenges that are rarely encountered or understood by those in urban or even many regional areas.

As well as one of the most significant droughts in history, locals deal with a shortage of skilled labor, long wait lists for doctors' appointments and poor internet and mobile phone coverage, all of which makes it difficult to meet their workers' insurance obligations.



By way of contrast, one of the most rewarding meetings I've had recently was with three managers from a security business who visited our pop-up office in Coffs Harbour.

At first, I was a bit apprehensive about their needs, but as the conversation flowed I began to understand their challenges and was able to offer some meaningful advice. The owner was a larger-than-life South African, who looked like a front rower for the Springboks. Looking me in the eye he thanked me for listening and said when he first walked in he thought they were going to hear an icare marketing spiel. Instead, he told me, I had listened to their needs and was able to offer genuine and sincere assistance and direction, for which he was extremely appreciative.

My favourite part of the job is when I'm able to offer a potential direction which may lead to solutions customers might not have considered.

I recently met with the owner of a bricklaying business who had a worker at home with a forearm injury. The man had been unable to work for five weeks, which was beginning to sap his motivation and cause some

depression. He also couldn't complete normal domestic tasks like mowing the lawn, and had to pay someone to do it for him.

Our meeting provided me with enough information to approach EML to have the claim escalated, a rehabilitation provider appointed, and the worker quickly assessed for domestic assistance.

One of the most common questions the Mobile Engagement Team get asked is, who is icare and what is our function?

During the winter of 2018 I was having a surf at my local break just down the road from home when I saw one of my neighbours, John, in the water near me. I didn't know John very well, and while chatting in the surf I learned that he was a local GP. Fantastic, I thought to myself. John's a GP therefore I won't need to explain who icare is and what we do, as doctors are key stakeholders in the Workers Insurance Scheme. But I could tell by John's body language that he had no idea who icare was. This experience was a simple reminder of the work the Mobile Engagement Team do and need to continue to do until the icare brand is a household name.



**My favourite part of the job is when I'm able to offer a potential direction that may lead to solutions customers might not have considered**



During 2018 we visited and presented at 43 metro, regional and remote areas across NSW and met over 1,000 customers, but there's still a vast area of the state we haven't seen.

Meeting communities and discussing changes to the scheme and how that impacts businesses sometimes leaves employers wanting more. We often receive requests for return visits to deliver a more specific or tailored education package.

In early 2018, I met with the regional manager of the NSW Business Chamber in Tamworth, Joe Townsend, to understand any local concerns and to see how icare could support local businesses. Joe explained that mental health issues were a challenge for both business and the community, with business owners struggling to identify, prevent and support staff or family with mental illness. As well, most business owners have neither the time nor resources to appropriately support staff or others who may be struggling.

Joe's concerns were supported by icare's statistics, which show that Tamworth and the New England area is experiencing the highest incidence of psychological injuries outside the major centres of Sydney, Wollongong and Newcastle.

We subsequently developed a mental health forum with several subject matter experts as speakers, which was one of the most successful events the Mobile Engagement Team held during 2018.

We've replicated the Tamworth experience in Wollongong, Newcastle and Wagga Wagga, and plan to bring the format to other areas of NSW. At each location we've met with locals and have an appreciation of their concerns. By providing a human element to a faceless organisation, the Mobile Engagement Team can address some common social challenges and help deliver on icare's social insurer philosophy.



# Making our services more industry relevant



icare is changing the way we're engaging with our customers, one industry at a time

**W**e're focused on providing targeted services to the more than 310,000 NSW businesses who come to us for their workers compensation insurance.

That means understanding what makes them tick – and one of the most crucial aspects that defines an organisation's workers compensation needs is the industry they belong to.

Group Executive Prevention and Underwriting, Andrew Ziolkowski, explained that the way icare aligns to employers is shifting towards their industry.

"An employer's industry has a massive bearing on what they need from their workers compensation insurance," he said.

"For example, a large construction business with a largely subcontracted workforce spread across multiple worksites performing dangerous physical tasks has dramatically different needs compared to a similar-sized financial services business with more permanent workers performing sedentary tasks in a limited number of office sites."

"Their workplace risks are different, the nature of their injuries is different, the relationship to their workforce is different and their return-to-work paths are different – all of which means their workers compensation needs are different."

"We're recognising this fact by changing our employer engagement program to provide services that are more relevant and aligned to industry lines," said Andrew.

Around 130,000 of icare's employer customers operate in one of four high-risk industries that together made up around 54 per cent of the scheme's claims made last year:

- manufacturing
- construction
- health and community services
- transport and storage.

If you work in one of these industries, you can expect to see some changes in the way that you're serviced in the second half of this year. This will be the starting point for extending an industry-based approach to other areas next year and beyond.

For larger employers in these industries – and those with specific needs – we're introducing a more specialised approach to providing advice and assistance.

We're currently building engagement teams made up of account managers with expertise in both workers compensation and each relevant industry. These teams will provide selected employers with access to a range of advice and services to help them manage their workers compensation and deal with any issues they may be having.

Coupled with this, we'll be providing online self-help resources on workers compensation topics that will be freely available to all NSW employers.

Starting with the four industries, the resources will cover a range of relevant issues, from claims management through to injury prevention. They will include data visualisation tools, calculators, document templates, reports, best-practice case studies and knowledge articles.

Andrew said the account management and online changes are the start of icare's journey towards providing more customised and relevant services for employers.

"We're confident that these initiatives will deliver more value to NSW businesses. But we're looking to push further and deliver more relevant services as we gain a more sophisticated understanding of our market segments," he said.

"For example, we're beginning to explore some of the ways that the capability and size of our employers interacts with the industry they operate in.

"Once we have a better picture of this, we can really start to drill down into our customers' needs and build even more relevant products and services for them."



# icare Paralympian Speakers Program



● Nigel Smith  
Paralympian and icare Speaker

## ▼ Nigel Smith was an active guy until a workplace accident changed his life

**F**ifty-year-old Nigel Smith is a professional volleyball player, having represented Australia in the 1998 Standing Volleyball World Championships in Poland and competed in the Sydney 2000 Paralympics. At the age of 25, while working on a heavy industry paint machine, Nigel's leg was caught in a chain conveyor. After enduring many operations and fighting numerous infections, his leg was eventually amputated.

Nigel shares his story to raise awareness among employers and employees about the importance of working safely.

### You were quite young when you had the accident. Tell us about your life before then.

I was working as a carpenter and moved to manufacturing when there was a downturn in the building industry. I had the accident a little over 12 months after that. I was 25 years old and led a really active life. I was involved in lots of sport, including rugby league, cricket, touch footy and golf.

### Sport has always been important to you. How did the accident change that?

Immediately after my accident sport was probably not my first priority, but it's been the most rewarding, both physically and mentally since then, especially playing sport with people with similar disabilities.

### In many ways the accident was a new beginning for you. Tell us about some of your major accomplishments since then.

The first time I was selected to play for Australia in the world championships in Poland would be right up there. To walk out into Stadium Australia on opening ceremony night at the Sydney 2000 Paralympic Games to 110,000 people screaming down at you is just the most amazing experience imaginable. To represent my country, in my country in front of my friends and family - I'm really not sure it gets much better than that.

### A lot has changed in the workplace over the years. What are the differences between then and now?

The obvious big change would have to be the safety culture in the workplace. Working unsafely is no longer acceptable.

What's driving safety in the workplace has also changed. When I had my accident, I believe safety programs were

driven by the money and costs involved after someone had been hurt, but after working in the safety industry for the past 17 or 18 years I've seen safety being driven more from the heart, and people really caring about not hurting other people. Most of the people I've met working in workplace safety have a reason why they've ended up there and they are just so passionate about helping other people avoid being hurt.

### You don't see yourself as disabled and have always had a 'get on with it' attitude.

I must say that attitude can change day by day, just the same as any able-bodied person. Understanding what other people around you are going through is important, and for me to sit in the corner crying about it would be a bit selfish. In these situations, you get the choice to give up or move forward. The people around you, your support network, don't get that choice, so the only way for them to go forward is for you to go forward and bring them with you.





## Jon Ward, Group Manager of Safety and Environment, tells Better about the program's impact at Visy

### How did Visy become involved in the Paralympian Speakers Program?

We first became aware of the program through the Paraplegic Benefits Fund, a Queensland-based spinal injury support organisation we work with to raise safety awareness at our Queensland paper mill.

### What messages are you keen for your teams to take away from these talks?

I want team members to think about safety and their daily hazards. There isn't just one message. The main safety message is that a serious injury has lifetime consequences and can strike anywhere if we take risks. But I think there are also messages about overcoming life's setbacks and having resilience, and these are uplifting for everyone.

I guess another message from the program is that we have to look out for each other. Speaking up is critical to a good safety culture. Not because the system says we should, but because we owe that level of care to each other to ensure we all go home safely.

### Workplace injury doesn't just affect workers but also their families and colleagues. What processes does Visy have in place to mitigate injury?

Injuries result from hazards and behaviours and the level of risk we tolerate, so our safety programs aim to reduce risk, and fewer injuries follow. Our programs are constantly under review to ensure we're having the greatest impact. It's also important to manage injuries proactively so we can get the best outcomes in the shortest time and return staff to full fitness and pre-injury duties.

### How important is icare's Speakers Program to your business?

Personal stories are more powerful than slogans and third-party reports. The Paralympian speakers really connect with the audience. Its link with sport gets everyone's attention, as do the stories of people who have turned setback into success. Nigel was an extremely powerful speaker and he really brought home to our workers how any of us could find ourselves in his position if we take a risk or don't challenge our mates when we see them doing something unsafe.

With icare's support we've included the Speaker Program as part of our Stop for Safety days across all the Visy Board sites, and there's been a marked change in work place behaviour and injury rates since then.



*The icare Paralympian Speakers Program provides icare customers access to current and former Paralympians affected by a workplace injury. Run in partnership with Paralympics Australia the program is a unique way to raise awareness of workplace health and safety. Our speakers demonstrate that with the support of those around them an injured worker can recover and go on and contribute to their workplace and community or even become a high-performance athlete. To find out more visit [www.icare.nsw.gov.au/icare-speakers-program](http://www.icare.nsw.gov.au/icare-speakers-program)*

### What are the key messages you want workers to hear?

I try and give people a bit of an idea of the widespread impact a major injury will have, not only on them but on friends, family and workmates. Communication and speaking up about safety and looking out for each other is really important. I also like to encourage workers to use the safety systems and tools that are in place in their workplace to their best advantage. The response we get from workers and management is great.

### You're keen to make a difference and use what happened to you for good. What are you most proud of?

I'm pretty sure I speak for all the guys and girls involved in the speaking program when I say it's such a fantastic opportunity for us to be able to use this horrific event in our lives to help other people avoid going through anything like we did. If we can do that, we're all winners.

You just will not find people anywhere that are more passionate about helping people avoid being injured.

I sometimes think people get passionate about what they're good at and I really believe that when I go out and tell my story I make a difference.

Of course, I'm proud of my sporting achievements but I'm also proud of my work with the Speakers Program. I'm certainly not your natural public speaker. I get so nervous beforehand and it's a pretty emotional and uncomfortable journey I go through with every talk. But if I talk to 100 people and I can help just one avoid anything like I went through then it's worth a little discomfort.





# Can we really blame everything on culture?

Building a positive safety culture is a critical layer of defence in preventing workplace injuries >>>



Anyone following the Australian media recently could be forgiven for concluding that culture is to blame for all our woes. Whether we're talking about the culture of our financial institutions or those that exist in the entertainment industry, culture has been highlighted as the culprit causing undesirable behaviours.

In the first scenario, Commissioner Hayne was scathing of the sales cultures within financial institutions that resulted in poor customer outcomes. In the second scenario, cultures that tolerated harassment appear to permeate the entertainment industry.

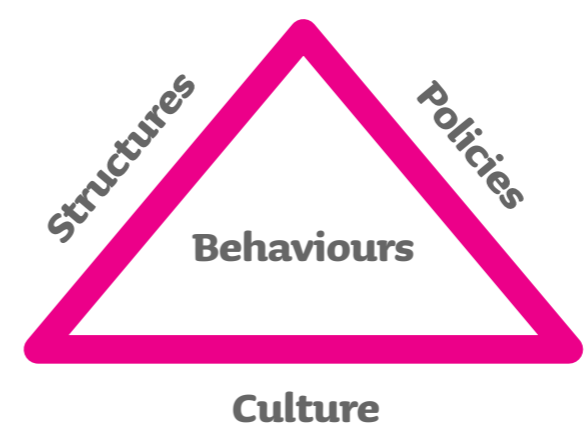
But what has this got to do with injury prevention and safety at work?

We know that there are particular values and attitudes in the workplace that drive positive health and safety behaviours and outcomes.

We're talking about leaders who 'walk the talk', promote health and safety as a priority and empower workers to make decisions about safety. Workplaces that develop trust between managers and workers and allow for clear, two-way communication. Workplaces that encourage reporting of safety matters, both good and bad, and use this as an opportunity to learn and improve.

So, as we look to influence behaviours in workplaces, industries and communities, culture is extremely important.

However, it's not the only aspect of the work environment that needs our attention. The structures and hierarchies we create in organisations also impact things like the accessibility and visibility of leaders, how easy communication is and how valued people feel. The policies and procedures we put in place in the workplace are tangible and guide activity aimed at embedding positive cultures, as does leaders modeling behaviors that bring organisational values to life.



Risk Analysis, Vol. 30, No. 10, 2010

However, culture is still often the culprit because it's an intangible component that's much harder to see. It's often the explanation for why policies and procedures were not followed, and is a critical layer of defence for preventing workplace injuries.

A culture survey is widely accepted as the best analytical approach to understand workplace culture, and icare has developed its own to help NSW businesses build a strong safety culture. Validated by Griffith University, the survey measures organisational culture across five dimensions:

- leadership
- communication
- interpersonal relationships
- guidelines, procedures and resources
- reporting.

icare partners with NSW businesses to conduct the survey and analyse the results. Businesses also receive a personalised culture dashboard containing insights into the different attitudes, beliefs and perceptions that exist across their organisation, and icare works with them to help develop a plan to positively influence their culture in the future.

According to icare's Injury Prevention Manager Jennifer Cameron, influencing your workplace culture doesn't need to be complicated.



● Jennifer Cameron  
Injury Prevention  
Manager

"It may simply involve thinking about key messages that are communicated, as well as how this communication occurs," she explains. "It may also be about changing the practices and structures that exist and considering how these influence behaviour."

## Lifting the importance of culture at Kleemann

In late 2018, residential and commercial lift provider Kleemann Elevators Australia began working with icare to create a safer workplace for their people.

Faced with the challenge of achieving a consistent and proactive approach to safety across multiple locations and projects, Kleemann took part in icare's Culture Survey. The survey uncovered specific cultural traits regarding safety, including the way risk was perceived and managed across the organisation.

"I would like to think I know how the majority of workers in the organisation feel about safety but until they have the opportunity to open up and talk about it, you don't truly know where there are areas to improve on. The survey gave our employees the chance to have their say on how safety impacts them in day-to-day business activity and in the long run," said Kleemann's Managing Director, George Kavallaris.

Through the survey, Kleemann learned that recognising what good safety looks like and rewarding it was vitally important to changing the way people think about safety.

"One area that stood out for me in the survey results was that our people are very passionate about recognition of good safety behaviours across the organisation. It was also clear to me that when safety was not done well we needed to recognise this and see it as an opportunity to do things differently," said George.

Kleemann is currently working on an action plan to improve safety well into the future.

Ultimately, a workplace culture that supports safety is the best defence in reducing risk. icare's team of injury prevention specialists are keen to partner with more NSW businesses to support them in building a strong safety culture. For more details, see [www.icare.nsw.gov.au/prevention](http://www.icare.nsw.gov.au/prevention)

- Gentle Bear with volunteers from Heathcote Rural Fire Brigade and Jason Allison, National Business Development Manager, Gallagher Bassett



# Gentle Bear

## Gentle Bear joins our first responders

✓ In January 2019, 2,500 Gentle Bears arrived on the doorsteps of 46 Rural Fire Service (RFS) stations in NSW, ready to care for the mental health of both young children affected by emergency situations and volunteer fire fighters across the state.

The NSW RFS is the world's largest volunteer fire service. Through our Insurance for NSW arm, icare provides workers compensation insurance to each of their more than 72,000 fire fighters.

“First responders are critical in taking care of the community in times of crisis, but we also know they need to take care of their own wellbeing. Many first responders experience trauma as part of their role and we recognise that psychological injuries are among the most complex, costly and life changing,” says Britt Coombe, icare’s General Manager of Agency Engagement.

First responder mental health is a priority for icare. Since 2017, the icare Foundation has been co-funding the Workplace Mental Health Research Program, focused on developing an evidence base for new interventions that benefit NSW emergency service workers. Gentle Bear represents an avenue through which icare can support the mental health and wellbeing of NSW’s volunteer firefighters.



● **Britt Coombe**  
General Manager  
of Agency Engagement



Research has shown that supporting others can reduce physiological stress responses during testing times, with the act of giving itself contributing to beneficial health outcomes<sup>1</sup>.

“We hope that Gentle Bear will not only benefit children and their families who are affected by emergency situations but that he’ll also look out for the wellbeing of our RFS volunteers. We hope that the act of giving a Gentle Bear will help our volunteer fires feel like they’re ‘doing something’ in situations that can otherwise make them feel powerless,” says Ms Coombe.

The NSW RFS aren’t the first lives to be touched by Gentle Bear. The idea was the brainchild of Gallagher Bassett. In 2007, they were working with the South Australian Police Department who wanted to do more to help the children they were coming into contact with when responding to 000 calls.

“We came up with the idea of sponsoring teddy bears that could be carried in emergency vehicles and given to children in the aftermath of traumatic events, like serious road-traffic accidents and domestic violence”, says Gentle Bear’s CEO, John McNamara.

**In 12 years, Gentle Bear has gone from an idea to a global phenomenon. More than 12,000 bears have been delivered to over 40 different organisations and charities in six countries around the world**

There are Gentle Bears in hospitals and schools, The Royal Flying Doctor Service, cancer research laboratories, The Jane Goodall Chimpanzee Rehabilitation Centre and charities, like the Red Cross and The Salvation Army.

“We have a goal of seeing the bears in every emergency service and police vehicle in Australia. Through our partnership with icare, Gentle Bear is taking his first steps into NSW. We’re so excited to see where Gentle Bear can go and what he can do for the children and first responders of NSW,” said Mr McNamara.

1. Inagaki, T., Eisenberger, N., 2016. ‘Giving support to others reduces sympathetic nervous system-related responses to stress’, *Psychophysiology*, vol 53, pp.427-435

# An inclusive society one idea at a time

How technology helps overcome the barriers that people with disability face



● Remarkable's 2019 cohort with Peter Horsely front row at right

**“Our vision is for an inclusive society where technology overcomes the barriers that people with disabilities face,” says Peter Horsley, founder of the icare foundation-funded inclusive technology accelerator, Remarkable**

“Smart plugs<sup>1</sup> that can keep a loved one safe and a digital game<sup>2</sup> to prevent drownings of children on the autism spectrum – these aren’t future ideas; they’re happening in real time, right now,” Peter said.

To realise their vision, Remarkable supports early-stage companies developing life-changing technology with seed funding and a 16-week mentoring program. Budding entrepreneurs are taken through their paces, beginning with the fundamentals of business right through to sales and sustainability.

Since launching in 2016, Remarkable has helped to build 26 incredible technology start-ups<sup>3</sup>, including seven new organisations that began their 16-week program in March 2019.

“The start-ups we support are actively changing the disability landscape and making real inroads on a more inclusive society,” Horsley said.

He’s not exaggerating – these start-ups are creating some serious waves. Sound Scouts<sup>4</sup>, from the first cohort to graduate the Remarkable program, has just secured a \$4m government contract for their technology to enable free hearing checks for all Australian school children, while Xceptional<sup>5</sup>, from the second cohort, won a \$1m Google.org Impact Challenge last year, and Loop+<sup>6</sup>, also from the second cohort, has gone on to secure icare foundation funding.

“For us though, we’re most proud of the impact that these start-ups are having on people’s lives,” said Horsley.

“From an injured child being able to attend school through a telepresence robot to sensors helping a wheelchair user manage the risks of scoliosis or pressure injury, and using virtual reality to take people



with physical disability on virtual excursions – these stories of inclusion are the reason we come to work every day,” he said.

In 2018, the icare foundation partnered with Remarkable, offering strategic and financial support.

“The start-ups coming out of Remarkable are creating technology and services that will directly help icare customers: the injured workers and road users in NSW,” said Barney Smith, icare foundation General Manager.

“We came onboard to ensure Remarkable had the funds to sustain its mission, and, from a strategic perspective, to connect Remarkable with icare customers. This means Remarkable and its start-ups get first-hand insights into the types of problems faced by icare customers and can feed that back into technology that will help solve those problems.

“The partnership also means that Remarkable’s start-ups are able to test their products with icare customers, receive direct feedback, and tweak the technology to ensure they’re solving problems in the most effective way, so it’s a win for everybody,” Smith said.

A 2018 icare foundation-funded social impact report on Remarkable found that, collectively, Remarkable’s start-ups have reached 3,251 end users, including 2,711 with a disability.

Indeed, the popularity of Remarkable is rapidly increasing as word spreads within the sector and more start-ups compete for a place in the program. According to the impact report, applications doubled between 2017 and 2018, from 20 to 40.

“We couldn’t do what we do without the support of icare,” said Horsley.

Learn more about the Remarkable’s work here or go to [remarkable.org.au](http://remarkable.org.au).

#### References

1. Smart plugs: [www.umpshealth.com](http://www.umpshealth.com)
2. A digital game: [www.autismswim.com.au](http://www.autismswim.com.au)
3. 26 incredible technology start-ups: [www.remarkable.org.au/startups](http://www.remarkable.org.au/startups)
4. Sound Scouts: [www.soundscouts.com](http://www.soundscouts.com)
5. Xceptional: [www.xceptional.io](http://www.xceptional.io)
6. Loop+: [www.loopplus.com.au](http://www.loopplus.com.au)





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