

# **Injury Management Pack**For Supervisors

Wivenhoe version Current January 2017 Title: SUPERVISOR CHECKLIST

Form: R00015(W) Version: 03/16



# **SUPERVISOR CHECKLIST**

	Obtain Injury Management Pack from the site Administrator (or from First Aid Room)			
	Notify Site Manager of situation (if you haven't already done so)			
	Notify Rehabilitation and Return to Work Coordinator of injury (if you haven't already done so)			
	Supervisor, Step Up Supervisor or Site Manager to accompany injured person to medical centre			
At the Doctors				
	Provide the Letter to the Treating Medical Practitioner (R0003) to the Doctor; and			
	Provide the Work Capabilities Checklist (R0005) to the Doctor; and			
	Provide any other additional information to the Doctor regarding work (as required).			
After the Doctors Appointment				
	Discuss the outcome with the Rehabilitation Coordinator once result is known			

LOCAL MEDICAL CENTRES				
NB. The injured worker can choose their treating medical practitioner				
Health Matters 1455 Brisbane Valley Highway Fernvale	(07) 5426 7788			
Banks St Medical Centre Cnr Banks Creek Rd & Burns St Fernvale	(07) 3463 9856			
Ipswich Hospital Chelmsford Ave Ipswich	(07) 3810 1111			



## **REHABILITATION & RETURN TO WORK COORDINATOR**

Heather Lonsdale - Health & Safety Coordinator Brisbane/Wivenhoe

P: 0407 737 745

E: <u>hlonsdale@csenergy.com.au</u>

Title: SUPERVISOR INJURY MANAGEMENT FAQ

Form: R0016 Version: 03/16



## SUPERVISOR INJURY MANAGEMENT FAQ

Work plays an important role in any rehabilitation process. Getting back into a normal work/life routine promotes recovery. Did you know, if a person is off work for:

- 20 days, the chance of ever getting back to work is 70 %
- 45 days, the chance of ever getting back to work is 50 %
- 70 days, the chance of ever getting back to work is 35 %.

The family doctor is best placed to advise and educate patients that, in most cases, a focus on return to work is in the best interest of the patient - for both their future and quality of life and that of their family.

CS Energy promotes staying at work or recovering at work and has systems in place to get the best outcomes.

#### What is my role when my employee is injured?

CS Energy leaders genuinely want to keep their people safe. If your worker is injured at work, accompanying them to the doctor demonstrates care and concern. You probably know your worker well and you can:

- help to reassure them
- answer their questions
- assist their doctor to determine whether it will be safe for them to return to work.

Ask for your employee's permission to speak with the doctor after the medical examination to talk about returning to work and suitable duties.

#### What do I discuss with the doctor?

Reassure the doctor that CS Energy values their employee and wants to help them to stay at work while they are recovering. You don't need detailed information about the medical condition but you do want their input on the type of suitable duties that the employee is able to handle. Emphasise that they will be supported and monitored at work by the Supervisor (you!) and the Return to Work Coordinator at site.

CS Energy offers a wide range of suitable activities to ensure that injuries are not exacerbated and that the worker remains comfortable and works within their capability.

## What if my employee refuses to let me speak with the doctor or sign the medical authority?

Early and consistent communication is key.

Remind your employee that they have a responsibility to be actively involved in treatment and rehabilitation.

A return to work plan is developed in consultation with them and is based on their doctor's medical recommendation. Ensuring that their doctor has input to the plan is the best way to guarantee the success of the plan.

If they still refuse to allow you to speak with the doctor then you must respect their decision. The matter can be followed up by the Rehabilitation and Return to Work Coordinator.

Title: WORKPLACE REHABILITATION PROGRAM

Form: R0003 Version: 03/16



# **WORKPLACE REHABILITATION PROGRAM**

## **To: The Treating Medical Practitioner**

	Constant to the OO France of
Employee's Name	is employed by CS Energy as Position Title
ot.	
at CS Energy Site	
CS Energy has a Workplace Rehabilitation into the workplace.	Program in place to assist in the early return of ill or injured workers back
	ed or non-work related illness or injury, CS Energy endeavours to offer duated return to work program within the capacity of the worker.
We would appreciate your help in identifyin	ng work capabilities that are suitable to the nature of the illness / injury.
This is intended to safely and effectively ret	turn to his / her usual work.
Discourse the state of the state of the state of	Employee's Name
Please contact me if you require further information rehabilitation facilities and programs. If the	ormation about our employees' job or if you wish to discuss the available need should arise, I will contact you.
Your sincerely	
	Date:
Rehabilitation and Return to Work Coordinat	or
Phone:	
Email:	
	WORKER AUTHORISATION
1	hereby give consent for my Doctor:
Name:	
Name: Address:	
Address: Phone:	Rehabilitation Coordinator
Address:  Phone: to discuss with  CS Energy Site	
Address:  Phone:  to discuss with  CS Energy Site information relating to my specific injury / illi	Rehabilitation Coordinator  Name of Rehabilitation Coordinator ness to assist with my Return to Work Plan / Suitable Duties Program.  named Rehabilitation Coordinator to release any relevant information of my
Address:  Phone:  to discuss with  CS Energy Site  information relating to my specific injury / illum  My permission is also given to the above methabilitation program to others who will furt	Rehabilitation Coordinator  Name of Rehabilitation Coordinator ness to assist with my Return to Work Plan / Suitable Duties Program.  named Rehabilitation Coordinator to release any relevant information of my
Address:  Phone:  to discuss with  CS Energy Site information relating to my specific injury / illi My permission is also given to the above n rehabilitation program to others who will furt I understand this consent is required to assi	Rehabilitation Coordinator  Name of Rehabilitation Coordinator ness to assist with my Return to Work Plan / Suitable Duties Program. named Rehabilitation Coordinator to release any relevant information of my ther assist in my rehabilitation.

Title: WORK CAPABILITIES CHECKLIST

Form: R0005 Version: 03/16



# **WORK CAPABILITIES CHECKLIST**

WORKER DETAILS:						
Name:						
Position:						
Team:						
Supervisor:						
WORKER CAPABILITIES:						
Upon examination and on			I am able to prov	ride the follow	wing report	
From	Until:					
	<u></u>					
The patient is fully fit to p	erform their	substanti	ve role.			
OR						
The patient is partially inc	capacitated	but may p	erform suitable d	uties (restric	tions detailed belo	ow)
I will review the patient on:						
	WORK C	APABIL	ITIES FOR SU	TABLE DI	JTIES	
Place <b>X</b> in bo			applicable and prov			
			Vorking Hours			
Usual hours R	educed hou	rs:	- hours a day	- (	days per week	Day shift only
		Wo	orking Activitie	es		
		No	Occasional	Frequent	Com	ments / Specify
Lifting / Carrying: weight limit	kg					
Bending / Twisting / Squatting						
Standing / Sitting						
Right / Left handed work						
Pushing / Pulling						
Walking on uneven ground						
Crawling / Clambering on Equip	ment					
Climbing – Stairs						
Climbing – Ladders / Scaffolding	9					
Driving – Standard Vehicles						
Driving – Heavily Sprung Vehicl (4WDs, Trucks)	es					
Driving – Unsprung Vehicles						
(Buggies, Forklifts, Dozers)						
Other:						
Medical / Dental Practitioner Details (please print clearly or use practice or hospital stamp)						
Doctor's name: Practice name:						
Signature: Date:						

Title: INJURED WORKER INFORMATION

Form: R0016 Version: 03/16



## INJURED WORKER INFORMATION

#### What is the role of the Rehabilitation and Return to Work Coordinator?

Your Rehabilitation and Return To Work Coordinator's (RRTWC) role is to help you return to work as quickly as possible following an injury or illness.

Your RRTWC has completed formal training to carry out this role.

## How does your RRTWC help you?

Your RRTWC will help you by:

- Contacting you as soon as possible after your injury to find out how you are and what your doctor has recommended
- Explaining the workers' compensation process and helping you make a claim with your insurer
- Notifying your insurer about your wage details so that compensation can be paid to you if your claim is accepted
- Helping you keep in touch with your work colleagues if you can't return to work straight away
- Developing a suitable duties program to assist in your return to work.

#### How does your RRTWC develop your Suitable Duties Program?

To help coordinate your return to work, your RRTWC will ask you to sign an authority. This confirms your permission for your RRTWC to contact your doctor and treatment providers such as your physio for information about your workplace injury or illness.

If your doctor has ticked 'fit for suitable duties' on your medical certificate, your RRTWC will develop a suitable duties program within the restrictions set by your doctor. They may arrange for a rehabilitation provider to assess your work tasks and other tasks available at work to help identify appropriate duties.

Your RRTWC will consult you and your supervisor about your suitable duties program. You have a right to have a representative with you when you attend any meeting to talk about suitable duties.

You and your supervisor will each be given a copy of your suitable duties program to sign and a copy will be sent to your doctor. This program will be upgraded as you recover until you are fit to return to your full time normal duties.

While you are participating in a suitable duties program your RRTWC will contact you and your supervisor regularly to check your progress. Make sure you tell your supervisor immediately if you are having any problems with your suitable duties as they may need to be changed.

After your workers' compensation claim has been finalised, your RRTWC will ask you to provide feedback on your experience of workplace rehabilitation. This is your opportunity to provide valuable input into how you have found the process and to help your RRTWC identify areas for improvement.

Title: INJURED WORKER INFORMATION

Form: R0016 Version: 03/16



## Injured at work? This is what you need to do...

- 1. Notify your Supervisor and get first aid or emergency medical treatment straight away.
- 2. Contact your Rehabilitation and Return to Work Coordinator (RRTWC) ASAP.

  They will help you with your rehabilitation and return to work planning, and will also provide you with important information regarding workers compensation if you intend to lodge a claim. Note: do not delay in contacting your RRTWC as early support is key to your recovery.
- 3. Keep a copy of all Incident and Injury Forms for your records.

  If you intend to claim workers compensation, ask your doctor for a workers' compensation medical certificate. Keep one copy for yourself, one for your employer and one for your insurer.
- 4. Some doctors will lodge your claim for you.

  If your doctor has not lodged your claim you can contact your RRTWC to assist you with this.

  Alternatively, you can:
  - Lodge online at <a href="https://www.worksafe.qld.gov.au/rehab-and-claims/injuries-at-work/making-a-claim">https://www.worksafe.qld.gov.au/rehab-and-claims/injuries-at-work/making-a-claim</a>
  - ➤ Lodge via phone WorkCover Queensland Claims Line: 1300 362 128
- 5. You must be a 'worker' under the Act who has suffered an injury or illness related to your work to be eligible for workers' compensation. Usually if you are an employee (whether casual, part time or full time) you are covered. If you are a contractor you are recommended to discuss further with your employer.
- 6. Focus on getting back to work and what you can do. If you have concerns about returning to work talk with your doctor, RRTWC, or Supervisor as soon as possible.

Your rights and responsibilities					
You have a responsibility to:	You have a right to:				
<ul> <li>report your injury or illness and get treatment as soon as possible</li> <li>lodge a claim if you want to be compensated for wages lost and medical expenses</li> <li>be actively involved in your treatment and rehabilitation</li> <li>do suitable duties within restrictions set by your doctor until you can resume your normal duties</li> <li>attend medical appointments (for assessment only) arranged for you by your insurer.</li> </ul>	<ul> <li>make a claim for compensation</li> <li>choose your own treating doctor</li> <li>have all personal information kept confidential</li> <li>have a representative for any meeting to talk about your claim</li> <li>have an interpreter or advocate</li> <li>be consulted about your rehabilitation and get a copy of your suitable duties plan</li> <li>get advice before signing anything.</li> </ul>				

Where can I go for more information?				
Rehabilitation and Re	turn to Work Coordinator			
Coordinator name:				
Contact Phone:				
Contact Email:				