Workers' Compensation and Injury Management Procedure

1. Guiding Principles

WA Country Health Service (WACHS) has statutory obligations under Section 155B and 155C of the *Workers' Compensation and Injury Management Act 1981* (the *Act*) to establish an Injury Management system; and initiate a Return to Work Program (RTWP) for an injured worker as soon as practicable and in conjunction with guidance from the worker's treating medical practitioner.

Effective: 26 April 2020

WACHS is committed to supporting injured workers progress towards resuming the full range of duties within their pre-injury role.

2. Procedure

The following Procedure applies to injuries where a workers compensation claim is to be lodged.

1.1 Initial Actions

As soon as practicable after the occurrence of a work related injury, disease or illness these steps are to be followed (the sequential order may vary according to circumstances):

- 1.1.1 Injured worker is to report the incident to a Supervisor or Manager.
- 1.1.2 First aid is to be provided and/ or medical attention is to be sought promptly. Manager is to arrange transport to medical practitioner, if required.
- 1.1.3 Injured worker is to obtain a WorkCover WA First Certificate of Capacity (First Certificate) from either a Medical Practitioner or a Dentist.
- 1.1.4 Injured worker is to complete and lodge a Safety Risk Report Form.
- 1.1.5 Injured worker is to present the First Certificate to their Line Manager.

1.2 Claim Lodgement

- 1.2.1 Line Manager is to forward the Workers' Compensation Claim Pack documents to the injured worker to complete; and offer assistance as required.
- 1.2.2 Injured worker is to return completed claim documents to Line Manager.
- 1.2.3 Line Manager to check and forward completed claim documentation to Regional Occupational Safety and Health (OSH) unit.
- 1.2.4 Line Manager is to update their rosters with correct coding.
- 1.2.5 Until claim liability is accepted by the Insurer, injured worker is to be paid through their leave entitlements where they have provided signed consent for this.
- 1.2.6 Occupational Safety and Health Coordinator (OSHC) is responsible for ensuring all documentation is fully and correctly completed prior to lodgement.
- 1.2.7 OSHC is responsible for submitting the claim to the Insurer within 3 business days of WACHS' initial receipt of completed documents i.e. from when the line manager receives the completed documents.
- 1.2.8 OSHC is responsible for sending a Claim Lodged letter to worker.
- 1.2.9 Following liability determination by the Insurer, OSHC is responsible for informing Line Manager of liability decision.
- 1.2.10 Insurer provides written notice of the claim liability status to the worker and WACHS within 17 days of the date the completed claim documents are first received by WACHS.
- 1.2.11 OSHC is responsible for sending the following completed forms to HSS at HSS.WorkersCompensation@health.wa.gov.au:
 - Request for Rate of Pay (ROP) calculations
 - Leave credits authority and overpayment deduction authority
 - Declaration of other employment
- 1.2.12 OSHC is responsible for referring the claim to IMC if there is a Lost Time Injury (LTI). Where a region does not have IMC cover, the OSHC will perform the IMC function. Where a region does not have an OSH Administration Assistant or equivalent, the OSHC will perform this function.
- 1.2.13 Injuries or conditions that are not accepted workers' compensation claims are to be managed by the injured worker's line manager in consultation with OSHC.

1.3 Return to Work (RTW)

Sections 1.3 and 1.4 apply to claims that are, or are expected to be, accepted. They may also be applied to some pended claims (claims awaiting a decision) at WACHS' discretion.

Where RTW activities commence prior to acceptance of the claim, these will be funded on a Without Prejudice and Without Admission of Liability (WOP/WAL) basis. Funding of selected activities or expenses on a WOP/WAL basis does not imply future acceptance of a claim.

RTW activities are to commence as soon as practicable for accepted claims.

RTW assistance may be offered for pended claims at WACHS' discretion. This offer may be withdrawn at any time if the claim is not subsequently accepted or if it remains pended for an extended period.

In some circumstances the worker may be unable to resume the full duties and contracted hours of their pre-injury role. Where medically indicated, an alternative goal may be supported.

WACHS will not create an alternative position for an injured worker. Injured workers must apply and compete for advertised positions in the usual merit select open recruitment process.

Alternative and restricted duties will be provided, where operationally viable, for a limited period, subject to medical advice. WACHS may withdraw these duties where medical evidence indicates that a worker is unlikely to be able to resume the inherent requirements of their pre-injury role.

Supernumerary work is only available for workers with an accepted claim. It is not available if a claim is pended or declined.

A supernumerary position is only to be utilised where a worker is unable to perform any of their pre-injury duties or other (support) work within their department.

Supernumerary positions must not include night shifts, weekends or public holidays. The provision of a supernumerary position:

- must be justified
- must be limited in duration (maximum 12 weeks) with weekly review; and
- requires Tier 4 Manager approval.

A Workplace Rehabilitation Provider (WRP) may be utilised in certain circumstances and must be discussed with the worker and treating medical practitioner. An IMC or a treating medical practitioner may make a referral to a WRP.

Use of a WRP should be limited to:

- Psychological injuries
- Where the worker is medically unsuited to their pre-injury role
- Other exceptional circumstances

WACHS reserves the right to terminate the employment if full capacity is not attained within 12 months of the first date of incapacity.

1.3.1 No Capacity – Psychological Injury

- a. Line Manager is to review the reported nature and cause of the injury and contact the worker if appropriate. Another Manager or Supervisor may perform this function if preferred. The IMC may also assist.
- b. The preferred Manager is to make contact with the injured worker within 48 hours of WACHS receiving the claim documentation.
- c. Weekly contact is to be made with the worker, subject to their agreement. Other intervals may be appropriate according to the nature of the injury and stage of recovery. This is to continue until 'Some Capacity' is certified.
- d. If the period of incapacity is certified as, or is likely to be, 10 days or more from the date of injury, IMC is to make contact with treating medical practitioner to discuss options for early return to work in some capacity. IMC is to liaise with Insurer and/ or Senior Injury Management Coordinator (SIMC) if there are circumstances where this may not be appropriate.
- e. If the worker may return to work, the IMC (or a Workplace Rehabilitation Provider) is to convene a case conference with the treating medical practitioner and injured worker, where possible, to discuss work capacity and suitable duties or alternative options.
- f. Where a claim is pended, the IMC may, in certain circumstances, commence RTW activities and/ or instigate assistance from a Workplace Rehabilitation Provider (WRP) on a WOP/WAL basis, following discussion with the Insurer and SIMC.
- g. It is preferable that the following are made available to the treating medical practitioner, for discussion at the case conference:
 - details of the worker's usual duties and/ or a worksite assessment
 - a proposed GRTWP
- h. Where appropriate, the treating medical practitioner may:
 - · certify the worker with Some Capacity
 - approve a GRTWP
 - · appoint a WRP
- When the treating medical practitioner certifies the worker with some capacity on a WorkCover WA Progress Certificate of Capacity (WorkCover Progress Certificate), proceed as per next section – Some Capacity.

1.3.2 No Capacity – Physical Injury

- a. Line Manager is to establish contact with worker within 48 hours of WACHS receiving the worker's claim documents. Another manager may perform this function if preferred.
- b. Line Manager and IMC are to liaise regarding next actions: contact with injured worker and treating medical practitioner.
- c. Line Manager to contact worker on weekly basis or as otherwise agreed, until 'Some Capacity' is certified.
- d. If period of incapacity is certified as, or is likely to be, 10 days or more from the date of injury, IMC is to make contact with treating medical practitioner to discuss options for early return to work in some capacity. IMC is to liaise with Insurer and/ or SIMC if there are circumstances where this may not be appropriate.
- e. If the worker may return to work, the IMC (or a Workplace Rehabilitation Provider) is to convene a case conference with the treating medical practitioner and injured worker, where possible, to discuss work capacity and suitable duties or alternative options.
- f. Where a claim is pended, the IMC may, in certain circumstances, commence RTW activities and/ or instigate assistance from a Workplace Rehabilitation Provider (WRP) on a WOP/WAL basis, following discussion with the Insurer and SIMC.
- g. It is preferable that the following are made available to the treating medical practitioner, for discussion at the case conference:
 - details of the worker's usual duties and/ or a worksite assessment
 - · a proposed GRTWP
- h. Where appropriate, the treating medical practitioner may:
 - certify the worker with Some Capacity
 - · approve a GRTWP
 - appoint a WRP
- When the treating medical practitioner certifies the worker with some capacity on a WorkCover WA Progress Certificate of Capacity (WorkCover Progress Certificate), proceed as per next section – Some Capacity.

1.3.3 Some Capacity

If a WRP is appointed, they are to stand in the place of the IMC for day to day RTW activities, in particular steps a to m in this section.

The IMC is to maintain contact with the WRP to ensure appropriate activities and reporting is carried out in a timely manner. The IMC may escalate unsatisfactory performance to the SIMC.

The IMC may assist the worker with selection of a WRP. WACHS' SIMC is to be notified when a WRP is engaged.

- a. If not undertaken already, whilst the worker has No Capacity, a case conference may be convened. Refer to 4.3.2 e to g.
- b. IMC initiates RTW meeting with worker and Line Manager. Consideration is given to:
 - Injury status and current capacity
 - Treatment/ diagnostic requirements
 - Other support required
 - RTW planning role, restrictions, duties, hours
- c. All are to contribute to identification and discussion of suitable and / or alternative duties (referring to treating medical practitioners recommendations, if applicable. This may include training that normally falls within the scope of the pre-injury role (e.g. online learning), if medically appropriate.
- d. IMC compiles the RTWP. A clear goal, supported by medical evidence, is to be documented. All activities are to be directed towards, and relevant to, that goal.
- e. IMC is to provide copy of the RTWP to the injured worker and Line Manager to sign. Treating medical practitioner is to be invited to approve.
- f. Worker is responsible for their participation in the RTWP).
- g. Line Manager is to meet with worker at least every week to discuss progress and challenges.
- h. Worker is responsible for participating in treatment as indicated by treating medical practitioners and allied health providers. Where treatment efficacy is questioned, worker is to discuss with treatment provider and/ or referring practitioner.
- i. Workers on a RTWP must have adequate supervision and support whilst certified with restricted capacity.
- j. Worker is responsible for providing consecutive and continuous WorkCover Progress Certificates after every medical practitioner consultation, to clearly indicate their capacity for work and identify physical restrictions.
- k. Line Manager, IMC and worker must review and amend/ update worker's RTWP following receipt of each WorkCover Progress Certificate.
- I. RTWPs are to be progressive and gradually increase the worker's range of duties in accordance with medical advice.
- m. WorkCover Progress Certificates and RTWPs are to be forwarded to the Insurer.
- Insurer is to forward copies of all medical practitioner, allied health provider, diagnostic/ imaging and Independent Medical Examination (IME) reports to WACHS.
- Where progress plateaus, a case conference with the treating medical practitioner is to be convened in the first instance, if all parties agree.
 Discussion with Insurer and SIMC around other case management strategies may follow.
- p. WACHS reserves the right to review the Return to Work goal including withdrawal of IMC support after a period of 6 months, if the worker has not achieved significant progress towards full capacity.

1.3.4 Full Capacity

- a. Worker may resume their full range of duties as a fully productive employee in their pre-injury role.
- b. If worker has been absent from work for 3 weeks or more, a graduated return to work may be offered. In this instance, proceed as per 'Some Capacity' section, above.
- c. Where a worker obtains full capacity following a period of incapacity, they must be afforded the opportunity to resume the full range of their pre-injury duties.
- d. If safety concerns remain as to the ability of the worker to perform their preinjury duties, further discussion must be held with the worker, Line Manager, treating medical practitioner and HR as to their ongoing suitability for the role. Further medical certification or assessment may be required. Advice may also be requested from the IMC; however the responsibility for workers with full capacity remains with the worker's line manager in consultation with the regional OSHC.

1.4 Leave

- 1.4.1 A worker must be available to participate, and actively engage in, a RTWP when they are certified with some capacity.
- 1.4.2 If an injured worker is required to be absent from the workplace for reasons unrelated to their workplace injury, they are to report this to their Line Manager and IMC. Additional medical certification or evidence may be requested.
- 1.4.3 Worker and Line Manager are to discuss all leave requests with the IMC.
- 1.4.4 An injured worker has the option to suspend their WC payments, whilst on leave, in order to preserve their entitlements.

1.5 Case Management

- 1.5.1 WorkCover Progress Certificates of Capacity are to be forwarded to the Insurer.
- 1.5.2 RTW review meetings are to be held at no later than 4 weeks and 8 weeks from the date of claim lodgement, unless a Final Certificate of Capacity has been issued by a treating medical practitioner. Line Manager, IMC and Worker are to be invited to participate.
- 1.5.3 Quarterly RTW review meetings are to be held every 12 weeks from the date of claim lodgement until a Final Certificate of Capacity has been issued by a treating medical practitioner. Senior Manager, Line Manager and Worker to be invited to participate. These are to be facilitated by the IMC.
- 1.5.4 WACHS is to hold quarterly claims review meetings with the Insurer, to discuss all open claims in each region. All participants are to collaborate in respect of ongoing case management and resolution strategies.
- 1.5.5 The Insurer is to liaise with SIMC in relation to claim settlement proposals and negotiations.

- 1.5.6 The Insurer is to advise the WACHS SIMC of settlements achieved.
- 1.5.7 The Insurer is to forward WorkCover settlement non-disapproval documents and workers' resignation letters to WACHS SIMC.
- 1.5.8 WACHS' SIMC is to advise OSH of settlements agreed.
- 1.5.9 OSH Admin is to review termination/settlement payment at 3 weeks from date of settlement agreement on the Health Support Services Workers' Compensation spreadsheet.
- 1.5.10 The Insurer is to close the claim file once all invoices and settlement monies are paid.

1.6 Queries and Disputes

- 1.6.1 In the first instance, a worker is to discuss and seek resolution of any issues with their:
 - Insurer's Case Officer in relation to liability, reimbursements and claim management matters
 - Line Manager in relation to rostering and pay gueries
 - IMC in relation to RTW programming and leave
 - OSH Admin in relation to submitting reimbursements and other claim related administration
- 1.6.2 The Insurer has an internal dispute resolution process available to injured workers.
- 1.6.3 Workers can seek information from WorkCover WA; or independent legal advice.
- 1.6.4 Where a worker lodges an application for Conciliation or Arbitration at WorkCover WA:
 - a. SIMC is to liaise with Insurer to determine strategy.
 - SIMC may liaise with IMC and/ or regional OSH Coordinator and/ or regional HR Manager to obtain management input into proposed outcome and strategy.
 - c. Insurer is to engage legal representation where appropriate.
 - d. SIMC is to attend conciliation conferences and arbitration hearings at WorkCover WA with Insurer and, where appointed, their legal representatives.
 - e. SIMC attendance at Directions Hearings and Interlocutory Hearings at WorkCover WA is discretionary.
 - f. SIMC is to attend Directions Hearings, Pre-Trial conferences and other interim or pre-trial hearings at WorkCover WA, District Court and the Supreme Court.
 - g. WACHS staff who have provided statements in relation to a dispute, where that dispute is listed for a hearing or trial at WorkCover or in Court, are to be provided support by the Insurer and/ or their legal advisors prior to the hearing. Liaison is to be via SIMC.
 - h. SIMC is to relay the outcome of WorkCover and Court hearings to IMC and regional staff, as agreed.

3. Definitions

These definitions apply to Workers' Compensation matters only.

Alternative duties	Duties outside the scope of a worker's pre-injury role, provided to enable them to resume meaningful and productive work, facilitate work hardening and allow them to re-engage with the workplace after a period of incapacity or injury.		
Capacity	Ability to perform activities of work.		
Case Conference	A meeting between the stakeholders of a claim to discuss the injured worker's ability to progress their Return to Work Program. Usually involves injured worker, treating medical practitioner and Injury Management Coordinator (IMC) or Workplace Rehabilitation Provider (WRP).		
Return to Work Meeting	Review of an injured worker's return to work progress. Usually includes the worker, Line Manager and Injury Management Coordinator (IMC).		
Claims Review	A meeting held on a quarterly basis between the Insurer and the employer to discuss all open (active) workers' compensation claims.		
Graduated Return to Work Program (GRTWP)	A document setting out the agreed duties and working conditions for an injured worker who: • has less than full capacity • is temporarily medically restricted to performing a reduced range of duties and / or is medically restricted to working reduced hours and/ or temporarily requires alternative duties • has an accepted workers' compensation claim (but it may also be offered to injured workers whose claim is pended)		
	and is to resume their full range of pre-injury duties as soon as medically appropriate, by gradually and continuously increasing their work activities.		
Injury Management Coordinator (IMC)	The WACHS Injury Management Coordinator has day- to-day responsibility for management of lost time workers' compensation cases.		
Lost Time Injury (LTI)	An injury resulting in an accepted claim that has caused the worker a period of absence from the workplace and/or a period of restricted capacity, as stipulated by a WorkCover Certificate of Capacity. For the purposes of OSH reporting, the Non Lost Time Injury definition is in accordance with AS1885.1		
Medical Practitioner	A person who is resident in Western Australia and		

	who is registered under the Health Practitioner Regulation National Law (Western Australia) in the medical profession; or a person who is not resident in a State or Territory of the Commonwealth but who is recognised as a medical practitioner for the purposes of the Act by WorkCover WA;	
Non LTI	An injury resulting in an accepted claim where the injured worker has not required any absence from work nor had any periods of restricted capacity, as stipulated by a WorkCover Certificate of Capacity. For the purposes of OSH reporting, the Non Lost Time Injury definition is in accordance with AS1885.1.	
Return to Work (RTW)	The process of an injured worker progressively increasing work duties.	
Return to Work Program (RTWP)	Refer to GRTWP, above.	
Senior Injury Management Coordinator (SIMC)	The Senior Injury Management Coordinator oversees the claims portfolio for the whole of WACHS.	
Suitable duties	Limited work duties within the scope of a worker's pre- injury role, provided to an injured worker who does not have full capacity for work.	
Supernumerary	Medically appropriate temporary duties, as an additional member of the team, to facilitate a Return to Work.	
VR1	The prescribed form used to engage the services of a Workplace Rehabilitation Provider (WRP).	
WOP/WAL	Without prejudice and without admission of liability. In certain circumstances, WACHS or the Insurer may agree to pay certain claim-related costs when a claim has not been accepted.	
WorkCover WA Certificate of Capacity	A medical certificate for the purposes of a workers' compensation claim. It provides detailed information about an injured worker's injury/ condition, how much work (hours and days) they can perform, restrictions they must adhere to at work, what treatment they need and the date of their next medical review/ appointment.	
WorkCover WA	The governing body for workers' compensation in WA	
Workplace Rehabilitation Provider (WRP)	An organisation external to WACHS who provides services to assist workers return to work. Services may include: return to work planning, external work trial, job-seeking assistance, worksite assessment.	

4. Roles and Responsibilities

4.1 Line Manager

The Line Manager, or another nominated manager, is the primary point of contact and support for an injured worker during their incapacity. The Line Manager can also seek support from the IMC. The Line Manager is to:

- Ensure First Aid is offered and/ or medical attention is sought when an injury is reported. Ensure transport is made available to the injured employee to attend a medical practitioner.
- Provide a Workers' Compensation Claim Pack to injured worker.
- Forward completed worker's compensation claim documents to OSH unit.
- Establish and maintain regular contact with injured worker, even when they are unfit.
- Engage in RTW planning with IMC and injured worker.
- Identify and provide suitable or alternative duties in line with medical restrictions.
- Remain first point of contact for injured worker and offer support throughout duration of claim.
- Monitor injured worker's progress and challenges; liaise closely with IMC / WRP to ensure worker is well supported and progressing as medically appropriate.
- Ensure injured worker's colleagues are supportive and maintain contact while injured worker is away from work.
- Forward WorkCover Certificates of Capacity to the IMC/ OSH Admin as soon as practicable.
- Ensure rostering reflects correct codes for workers' compensation payments and productive duties as per RTWP.

4.2 Injured Worker

The injured worker's responsibilities are to:

- Report injury to Supervisor/ Line Manager as soon as practicable
- Seek appropriate first aid and / or medical attention. The injured worker is able to choose the treating medical practitioner
- Obtain a **WorkCover First Certificate of Capacity** and provide this to Line Manager as soon as practicable.
- Complete and submit a Safety Risk Report Form.
- Complete Workers' Compensation Claim Pack and return to Line Manager.
- Attend treating medical practitioner for regular review; attend treatment as indicated and as referred.
- Inform Line Manager of diagnostic and treatment requirements, appointment dates and times.
- · Participate in the RTWP.
- Provide regular WorkCover Progress Certificates of Capacity to Line Manager.
- Discuss any issues that arise with the RTWP with Line Manager and IMC
- Report any symptom increases immediately, to IMC and line manager, to minimise aggravation of the injury. Seek medical attention or review, as required.

4.3 Senior Injury Management Coordinator (SIMC)

The Senior Injury Management Coordinator oversees the WACHS claims portfolio and is to:

- Provide information and advice on all aspects of claim and injury management.
- Provide strategic direction across WACHS' claims portfolio.
- Participate in quarterly claim review meetings with regional Injury Management staff and the Insurer.
- Review and approve settlement ranges following recommendations by the Insurer.
- Liaise with the Insurer and regional Injury Management staff in relation to disputed matters.
- Attend dispute and litigation hearings as WACHS' representative; and provide outcome reports to the relevant Injury Management staff and others as appropriate (e.g. HR Manager).
- Review policies and supporting documents for WACHS' Injury Management system.

4.4 Injury Management Coordinator (IMC)

The Injury Management Coordinator has day-to-day responsibility for management of lost time workers' compensation cases. They are to:

- Liaise with Line Managers, injured workers and treatment providers in respect of medically appropriate return to work duties and options.
- Coordinate and monitor the Return to Work Program.
- Monitor workplace rehabilitation providers.
- Attend medical case conferences, case management meetings and claim review meetings.
- Provide support and guidance to workers and Managers throughout the claim duration.
- Collaborate on Return to Work goals and claim strategies.

4.5 OSH Coordinator

The regional OSH Coordinator is to:

- Act as first point of contact for Line Managers following claim lodgement by an injured worker.
- Follow up on Safety Risk Report form and ensure investigation process is completed.
- · Check completed claim documentation and submit claims to Insurer.
- Refer LTI claims to the IMC.
- Manage non-LTI claims in collaboration with the Line Manager, injured worker, treating Doctor and Insurer.
- Liaise with the IMC for non-LTI cases that are obtaining treatment, if required.
- Where there is no IMC allocated for the region the OSHC will take on this role.

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4.6 OSH Administration Assistant

The regional OSH Administration Assistant provides administrative support and assistance to the OSH Coordinator and IMC. They are to:

- Ensure a claim file is created in WACHS Records Management System for the retention of relevant claim documentation.
- Assist with maintaining claim records on WACHS' Records Management system
- Send WorkCover Certificates of Capacity, RTWPs and injured worker's invoices and reimbursement claims to the Insurer.
- In consultation with Line Managers, complete and send fortnightly recoup spreadsheet to the Insurer.
- Ensure Recoups are reconciled.
- Coordinate the receipt and distribution of all claim related documentation between service providers, IMCs and the Insurer.

5 Compliance

This Procedure has been developed as required by sections 155B and 155C of the *Workers' Compensation and Injury Management Act 1981* (WA), and in accordance with Parts 2 and 3 of the *Workers' Compensation Code of Practice (Injury Management) 2005*.

In conjunction with the WACHS Workers Compensation and Injury Management intranet page, it makes up the WACHS Injury Management System.

Failure to comply with this procedure may constitute a breach of the WA Health Code of Conduct (Code). The Code is part of the <u>Integrity Policy Framework</u> issued pursuant to section 26 of the <u>Health Services Act 2016</u> (WA) and is binding on all WACHS staff which for this purpose includes trainees, students, volunteers, researchers, contractors for service (including all visiting health professionals and agency staff) and persons delivering training or education within WACHS.

WACHS staff are reminded that compliance with all policies is mandatory.

6 Records Management

All WACHS corporate records must be stored in the approved Electronic Documents and Records Management System. All communications are to be documented. Records regarding workers' compensation are to be stored with privileged access only.

Records Management Policy

7 Evaluation

Monitoring of compliance with this document is to be carried out by the WACHS Senior Injury Management Coordinator, using the WACHS Claims Audit tool [under development].

8 Standards

National Safety and Quality Health Service Standards – 1.1a, 1.7c

9 Legislation

Workers' Compensation and Injury Management Act 1981

10 References

Workers' Compensation and Injury Management Regulations 1982 Workers' Compensation Code of Practice (Injury Management) 2005

11 Related Forms

Safety Risk Report Form

12 Related Policy Documents

WACHS Hazard-Incident Management Procedure WACHS Occupational Safety and Health Policy

This Procedure supersedes:

WACHS Workers' Compensation and Injury Management System
WACHS Injury Management Policy
WACHS Injury Management System - Overview
WACHS Workers' Compensation Claims Management Procedure and Addendum

13 Related WA Health System Policies

Nil

14 Policy Framework

Department of Health Employment Policy Framework

This document can be made available in alternative formats on request for a person with a disability

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