## SESLHD PROCEDURE COVER SHEET



| NAME OF DOCUMENT                      | Injury Management – Redeployment of Injured Employees under Workers Compensation Procedure                                                                                                                                                                      |
|---------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| TYPE OF DOCUMENT                      | Procedure                                                                                                                                                                                                                                                       |
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| LEVEL OF EVIDENCE                     | NSQHS Standard 1 Governance for Safety and Quality in Health Service Organisations                                                                                                                                                                              |
|                                       | Workers Compensation and Workplace Injury Management Act 1998, Ch. 3, Part 2, S49 (2)                                                                                                                                                                           |
| REVIEW DATE                           | June 2023                                                                                                                                                                                                                                                       |
| FORMER REFERENCE(S)                   | N/A                                                                                                                                                                                                                                                             |
| EXECUTIVE SPONSOR or                  | Joy Hiley                                                                                                                                                                                                                                                       |
| EXECUTIVE CLINICAL SPONSOR            | Director Workforce Services                                                                                                                                                                                                                                     |
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| POSITION RESPONSIBLE FOR THE DOCUMENT | Peggy Pollock, Manager - Health Safety and Wellbeing<br>Peggy.Pollock@health.nsw.gov.au                                                                                                                                                                         |
| KEY TERMS                             | Redeployment, workers compensation, injured employee                                                                                                                                                                                                            |
| SUMMARY                               | The purpose of the South Eastern Sydney Local Health District (SESLHD) Redeployment of Injured Employees Procedure is to provide a framework for consistently managing the redeployment of injured employees within SESLHD in a professional and timely manner. |



## Injury Management – Redeployment of Injured Employees under Workers Compensation Procedure

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#### 1. POLICY STATEMENT

Where occupational illness or injury prevent an employee from returning to the duties of his/her pre-injury position, workers compensation legislation requires that every effort is made to place the employee into suitable employment so far as practicable the same as, or equivalent to, the employment in which the employee was at the time of injury. Workers Compensation and Workplace Injury Management Act 1998, Ch. 3, Part 2, S49 (2)

SESLHD will ensure the possibility of placing such employees to vacant positions will be explored before advertising where possible, or in the period between the advertising of a vacant position in Recruitment and On-Boarding (ROB) and the closing date for receipt of applications, in order to comply with <a href="NSW Health PD2017">NSW Health PD2017</a> 040 Recruitment and Selection of Staff of the NSW Health Service.

#### 2. BACKGROUND

Redeployment is required when an injured employee is deemed as unable to upgrade or rehabilitate to their pre-injury position (hours, shift pattern and duties) due to long-term or permanent medical restrictions, and reasonable modification cannot be made to their pre-injury position, and/or a suitable alternative position cannot be provided within the injured employee's department/unit.

#### 3. RESPONSIBILITIES

#### 3.1 Injured Employees will:

 Cooperate with the employer and workers compensation insurer to make all reasonable efforts to return to work in suitable employment or pre-injury employment at their place of employment or at another place of employment.

#### 3.2 Recovery at Work Coordinators will:

- Coordinate the internal redeployment process for injured employees, including communicating with all relevant stakeholders
- Provide advice and information for all parties during the redeployment process regarding the process and their obligations
- Maintain a comprehensive documented client file regarding the redeployment process.



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#### 3.3 Recruitment Hiring Managers will:

- Collaborate with and support the SESLHD Recovery at Work Coordinators to redeploy injured employees as per Section 2.3 of <u>NSW Health PD2017\_040</u> Recruitment and Selection of Staff of the NSW Health Service
- Reasonably consider injured employees for vacancies prior to advertising
- Participate in the fair and unbiased assessment of an injured employee's suitability for a vacant position against the position selection criteria, job description and job demands checklist
- Suspend recruitment if a match is identified
- Priority assess matched employees within designated timeframes as set out in Appendix 5 of these guidelines.

### 3.4 Line Managers will:

- Make all reasonably practicable efforts to provide suitable employment for injured employees
- Provide appropriate support, training, supervision and feedback to any injured employees undergoing a work trial in their department.

#### 3.5 Human Resource Advisors will:

- Ensure the obligations to redeploy injured employees imposed by the <u>NSW Health PD2017\_040 Recruitment and Selection of Staff of the NSW Health Service</u> are upheld throughout SESLHD
- Facilitate the transfer of injured employees into a suitable vacancy.

#### 4. PROCEDURE

#### 4.1 Commencing job-seeking

The Recovery at Work Coordinator will request the TMF Fund Manager refer the injured employee to an occupational rehabilitation provider as soon as the change in vocational goal is agreed to by the Nominated Treating Doctor and the need to job-seeking is identified.

A formal Vocational Assessment and functional capacity evaluation will be undertaken to clearly identify suitable employment options (See **Section 4.3** for a definition of suitable employment).

The Vocational Assessment will include a job seeking skills, an assessment of appropriate suitable employment options, and revision of the injured employee's Resume as necessary.

The Recovery at Work Coordinator will ensure the suitable employment options are communicated to and agreed by the injured employee and their Nominated Treating Doctor in writing. This may be done via the vocational assessment process and a copy provided to the Recovery at Work Coordinator.



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The Recovery at Work Coordinator and occupational rehabilitation provider will commence providing the injured worker with assistance in job-seeking both internal and external to SESLHD respectively.

The injured employee **may also** review job vacancies via the online recruitment systems on a regular basis and bring potential suitable positions to the attention of the Recovery at Work Coordinator (SESLHD vacancies) or occupational rehabilitation provider (external vacancies) in a timely manner. If the injured employee is not attending work at the time, the employee may choose to access the lists from their home or by physically attending the workplace to access the internet.

#### 4.2 Injured worker responsibilities

It is the responsibility of the injured employee to job seek under the current workers compensation legislation.

The injured employee is to provide the Recovery at Work Coordinator with a copy of their up-to-date resume, detailing their skills, education and work history.

#### 4.3 Suitable employment within SESLHD

The Recovery at Work Coordinator and injured employee will work to identify suitable employment options within SESLHD that are the same as, or equivalent to, the employment in which the worker was at the time of injury <a href="Workers">Workers</a></a>
<a href="Compensation and Workplace Injury Management Act 1998, Ch. 3, Part 2, S49 (2), matching:

- a. The identified suitable employment goal
- b. The injured employee's medical restrictions, current capabilities and prognosis for further recovery
- The employee's ability to undertake/participate in on-the-job or formal retraining
- d. Remuneration between 80-100% of the employees pre-injury award wage.

#### 4.4 Job Seeking Competency and Agreement

The Recovery at Work Coordinator and injured employee meet and assess the injured employee's competency with respect to job seeking for suitable employment as per **Appendix 1 Job Seeking Competency Assessment.** If the injured employee **or** Recovery at Work Coordinator assess the injured employee requires further assistance with job seeking skills, the Recovery at Work Coordinator may refer the injured worker back to the occupational rehabilitation provider for further assistance.

Once the suitable employment options within SESLHD are identified, the injured employee and Recovery at Work Coordinator are to determine an appropriate job-seeking agreement as per **Appendix 2 Job Seeking Agreement**.



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#### 4.5 SESLHD Redeployment Profile

The Workers Compensation Claims Manager will request that Human Resources Advisory Services will update the employee's profile in Recruitment and On-Boarding (ROB) via **Appendix 3 Redeployment Profile Notification**. The ROB profile will include the injured employee's name, classification, salary range and employment preferences (suitable roles considering the employee's restrictions, skills and experience).

The injured employee will be listed on the ROB profile for twelve weeks. The Workers Compensation Claims Manager will confirm in writing to the injured worker that their profile in ROB has been updated and the date internal job-seeking will be completed **Appendix 4 Letter to Injured Worker Confirming Suitable Employment Goal.** 

Communication to the injured employee will also include job-seeking processes and requirements, as well as priority assessment timeframes as set out in **Appendix 5 Priority Assessment Timeframes**.

Prior to publishing a vacancy, Workforce Transactions and Information Services will review recruitment requests to determine if any vacancies meet the criteria of injured workers listed on the ROB profiles.

#### 4.6 Suitable vacancy identified within SESLHD

Should a SESLHD vacancy be identified, and deemed appropriate for further assessment, Workforce Transactions and Information Services will notify the Workers Compensation Claims Manager.

The Workers Compensation Claims Manager and/or the Recovery at Work Coordinator, will complete a preliminary assessment of the vacancy considering the suitable employment goal, the grading/classification, remuneration and the injured employee's medical restrictions, current capabilities and prognosis for further recovery.

Should the vacancy be assessed as suitable for priority assessment, the Workers Compensation Claims Manager/ Recovery at Work Coordinator must complete the **Appendix 6 Redeployment Position Matching Referral Form** and forward to Workforce Transactions and Information Services, who will then provide the redeployment position matching referral form to the recruitment Hiring Manager in order to suspend the recruitment process.

Where the Workers Compensation Claims Manager/ Recovery at Work Coordinator deem that the vacancy does not meet the criteria for priority assessment, clear reasons for the decision should be documented via the Redeployment Position Matching Referral Form (**Appendix 6**).

<u>Workforce Transactions and Information Services must be notified within one business day of the outcome of the assessment.</u>



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Only one suitable vacancy can be quarantined at any one time for an injured employee. Where a number of vacancies may deemed suitable at once, priority shall be given to quarantine the one that most closely meets the highest priority Suitable Employment goal on the Vocational Assessment Report.

### 4.7 The priority assessment

The Recovery at Work Coordinator will send an email to <u>SESLHD-Recruitment@health.nsw.gov.au</u> advising of the REQ number and requesting that Workforce Transactions and Information Services place the position advertisement on hold while the priority assessment occurs.

A priority assessment is different from standard merit recruitment. In a priority assessment, injured staff members are assessed for suitability for a position independent of other applicants and prior to, or when, the position is advertised. The assessment determines whether an injured employee meets the selection criteria for the position or is likely to perform adequately in the position in a reasonable period of time (usually three months) given access to appropriate training and support.

Unlike merit selection, a resume supplied for priority assessment is not used to shortlist the applicant. It is used to support the priority assessment interview. Under no circumstances can the recruiting organisation "cull" an injured employee from the priority assessment process on the strength of a resume alone.

<u>Step 1</u> The selection criteria and Position Description for the vacant position should be provided to the staff member and the suitability of the match discussed.

Every effort should be made to ensure the position is suitable before the match is made.

Unsuitable matches delay the process for the recruiting service.

Step 2 The injured employee must address the essential criteria in writing and provide a copy with a current resume for review and priority assessment by the Recovery at Work Coordinator, Human Resources Advisor and Recruitment Hiring Manager by close of business the next working day as set out in **Appendix 5** (**Priority Assessment Timeframes**). The resume must contain the names and contact numbers of two referees. One referee should be a current or recent line manager or supervisor.

Should the injured employee refuse to complete and submit the documentation, the Recovery at Work coordinator will document the refusal in InjuryConnect, and the vacancy will returned to Workforce Transactions and Information Services for advertising.

Step 3 A priority assessment interview should then be arranged with the injured employee within 4 days of match as set out in **Appendix 5.** Where more than one



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injured employee is a possible match to a vacant position, a merit selection process will occur.

All priority assessments must, at a minimum, comprise:

- 1. an interview supported by a resume
- 2. two referee checks

The priority assessment interview panel should consist of at least two members, one being the convenor. Due to time constraints, an independent panel member is not required but may be appropriate in some circumstances.

Interview questions should be based on the selection criteria as in a merit selection interview. The panel may prompt the injured employee, rephrase questions or ask further questions during the interview where necessary to ensure a thorough assessment is made. A **Priority Assessment Report** (**Appendix 7**) is to be commenced.

Step 4 Both referees are to be contacted by the hiring manager or panel as part of the general assessment process, not merely in the case where the injured employee is to be recommended for the position. This should be done within one working day of the interview. The panel is to consider the referee report along with the interview and resume in deciding on the suitability of the injured employee for the position.

Referee comments should be summarised and included in the Priority Assessment Report (**Appendix 7**). The hiring manager should inform the referee that the staff member will receive a copy of the Priority Assessment Report, and advise them that their comments, though not directly quoted, will be summarised and made available via the report.

#### 4.8 Unsuccessful assessment

An unsuccessful Priority Assessment Report must be forwarded by the hiring manager to the injured employee's Recovery at Work Coordinator who will arrange a meeting with all parties to discuss the outcome with the injured employee. Any concerns regarding the outcome should be discussed with the hiring manager within one working day of the report being received.

In addition to the report, the hiring manager should provide constructive feedback that explains:

- where the staff member has not demonstrated the ability to meet specific selection criteria immediately or within a reasonable period of time given access to appropriate training
- any selection criteria that the staff member demonstrated they met, and the staff members strengths
- areas where the staff member might need additional training and development



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When the assessment is complete the recruiting service may proceed with recruitment to the position, subject to meeting the requirements of any directions from the Secretary, NSW Health on advertising vacancies.

#### 4.9 Successful assessment

Should the injured employee meet the inherent criteria of the position, and/or be deemed able to up-skill into the position within three months, the injured employee will be offered a work trial placement in the position for a period of up to three months.

The Recovery at Work Coordinator will write a Recovery at Work Plan for the agreed job trial period (maximum three months).

The Hiring Manager/Line Manager must also document relevant performance goals and training requirements (internal, external and on-the job). This information should be documented via **Appendix 8 Performance Review Template**, or similar, ensuring all relevant information is included.

The Recruitment Hiring Manager shall then cease all further recruitment actions for the vacant position.

The Line Manager will complete the necessary forms/procedures to transfer the injured employee to the position for the work trial period (temporary up to 13 weeks). The injured employee is rostered into and is paid for by the new Department.

Training requirements identified as part of the priority assessment process should be arranged by the Convenor and implemented as soon as possible.

#### 4.10 Monitoring during the work trial

The Recovery at Work Coordinator and Line Manager will monitor the injured employee at regular intervals for the duration of the work trial. The Line Manager will arrange appropriate support, training, supervision and feedback to the injured employee during orientation and throughout the work trial.

Reviews will be conducted at two, four, six and eight weeks and performance reviewed, feedback provided and progress documented via **Appendix 8** or similar ensuring all relevant information is included.

#### .4.11 Unsatisfactory performance during the work trial

Should the Line Manager deem the injured employee as unsatisfactory for permanent appointment to the position, clear, objective, documented evidence must be provided to the Recovery at Work Coordinator and injured employee via a revised priority assessment form, with reference to the selection criteria and position description.

The work trial can cease at any time if it is deemed it is not suitable for the team and/or the performance goals have not been met, even though appropriate training, education and support has been provided, and that no further improvements can be made.



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The employee must be advised in writing that the work trial will cease via **Appendix 9 Letter Advising of Cessation of Work Trial**.

#### 4.12 Extension of a work trial

In some cases, the injured employee may not have completed all required training or gained sufficient experience in one or two aspects of the role by the end of the initial three month period (for example, use of internal IT systems). Where the injured employee is performing satisfactorily in other aspects of the role, the work trial may be extended for up to another three months.

### 4.13 Ongoing placement on completion of the work trial

If the injured employee has demonstrated the required ability and attributes to perform the position requirements upon completion of the work trial, the injured employee will be transferred into the position on a permanent basis (direct appointment through ROB).

The Recovery at Work Coordinator will inform the Human Resources Advisor to update the injured employee's ROB profile.

The injured employee should receive a formal letter of offer confirming ongoing placement as per the recruitment processes of Workforce Transaction and Information Services.

#### 4.14 Criteria for referral for ceasing internal job-seeking in SESLHD

The following criteria will prompt the cessation of internal job-seeking and referral of the injured employee to an occupational rehabilitation provider for assistance with vocational retraining and redeployment outside of SESLHD:

- a. If a suitable employment option within SESLHD cannot be identified by the Recovery at Work Coordinator or the occupational rehabilitation provider through the vocational assessment process.
- b. If no suitable employment vacancy arises within SESLHD within 12 weeks of approval of the Suitable Employment goal and commencement of job-seeking.
- c. Non-compliance by the injured employee with three attempts to place them in a suitable employment position within SESLHD.
- d. The injured employee fails two work trials within SESLHD.

Should the injured employee be referred to an occupational rehabilitation provider as per the above criteria, the SESLHD Recovery at Work Coordinator will close the rehabilitation file.

The injured employee is able to continue independent job-seeking efforts within SESLHD while an exit strategy is proposed. This may include commencement of a work trial placement external to SESLHD, gaining suitable employment with an external organisation or medical termination.



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Following closure of the rehabilitation file, the injured employee will be monitored by the Workers Compensation Claims Manager. Should the injured employee identify a suitable employment position, they are to advise the Workers Compensation Claims Manager, who will re-refer them to the Recovery at Work Coordinator to arrange the assessment of the position, the injured employees' suitability for the position, and work trial.

#### 5. DOCUMENTATION

Recovery at Work case management file (InjuryConnect)
Human Resources Advisory Services case management file
Recruitment records for the applicable position
The injured employee's StaffLink records

#### 6. AUDIT

NSW Ministry of Health Workers Compensation and Injury Management case file audit

#### 7. REFERENCES

NSW Health PD2017 040 Recruitment and Selection of Staff of the NSW Health Service Workers Compensation and Workplace Injury Management Act 1998, Ch. 3, Part 2, S49 (2)

#### 8. REVISION AND APPROVAL HISTORY

| Date         | Revision No.         | Author and Approval                                  |
|--------------|----------------------|------------------------------------------------------|
| June 2013    | Draft                | Peggy Pollock, Manager Health Safety and Wellbeing   |
| Sept 2013    | Version 1            | Peggy Pollock, Manager Health Safety and Wellbeing   |
| October 2013 | Version 1            | Approved by DET.                                     |
| March 2018   | Version 2 -<br>draft | Peggy Pollock, Manager Health Safety and Wellbeing   |
| April 2018   | 2                    | Major review indicated – posted on Draft for Comment |
| May 2018     | Version 2 -<br>final | Peggy Pollock, Manager Health Safety and Wellbeing   |
| May 2018     | 2                    | Final Draft approved by Executive Sponsor            |
| June 2018    | 2                    | Endorsed by Executive Council                        |



Injury Management – Redeployment of Injured Employees under Workers Compensation Procedure

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**APPENDIX 1 Template Job Seeking Competency Assessment** 

## JOB SEEKING COMPETENCY ASSESSMENT

| Employee Name:                                                            |                                |                               |                                 |
|---------------------------------------------------------------------------|--------------------------------|-------------------------------|---------------------------------|
| Date of Assessment:                                                       |                                |                               |                                 |
| Assessor:                                                                 |                                |                               |                                 |
| JOB SEEKING TOOL                                                          | CLIENT REPORTED COMPETENCY     | CLIENT ASSESSED<br>COMPETENCY | EXTERNAL<br>SERVICE<br>REQUIRED |
| Resume and cover letters                                                  |                                |                               | YES / NO                        |
| Utilising the Internet and PC to job search                               |                                |                               | YES / NO                        |
| Ability to use and navigate on-line job seeking websites                  |                                |                               | YES / NO                        |
| Ability to address Selection<br>Criteria for Internal SESLHD<br>positions |                                |                               | YES / NO                        |
| Interview Techniques                                                      |                                |                               | YES / NO                        |
| SESLHD training courses that may                                          | assist in providing transferal | ble skills:                   |                                 |
| Request made to manager to app                                            | prove enrolment YES            | NO                            |                                 |
| Date:                                                                     |                                |                               |                                 |
| Assessor signature:                                                       |                                |                               |                                 |



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### **APPENDIX 2 Template Job Seeking Agreement**

## **JOB SEEKING AGREEMENT**

| Job Seeking Activity                                                                                                                      | Timeframe for Completion  |
|-------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|
| Development of Resume and Cover Letter                                                                                                    |                           |
| 2 Attendance at 3 job seeking meetings as follows:                                                                                        |                           |
| [insert detail]                                                                                                                           |                           |
| Record internal job seeking efforts on Employers Mutual TMF job seeking logs (5 jobs per week)                                            |                           |
| Actively participate in job seeking activities throughout duration of job seeking / Return to Work program                                |                           |
| 5 Immediate notification to SESLHD and Employers Mutual TMF should a change in circumstances occur (e.g. change in medical certification) |                           |
| I have seeking responsibilities as outlined above                                                                                         | read and understood my jo |
| Employee Signature:                                                                                                                       |                           |
| Date:                                                                                                                                     |                           |
|                                                                                                                                           |                           |
| Recovery at Work Coordinator Signature:                                                                                                   |                           |

NOTE: Failure to participate in your return to work job seeking activities can result in cessation of your workers compensation benefits.



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## APPENDIX 3 Redeployment Recruitment and Onboarding (ROB) Profile Notification

**Attention: Human Resources Advisory Services** cc Workforce Transactional and Information Services Email: HRA email address SESLHDWorkforceServicesEnquiries@health.nsw.gov.au CC: Please update the following injured employee's profile in ROB: Registration commencement date: \_ Registration completion date: Name: **Current Classification: Current Salary/salary range:** Suitable employment goal: Please quarantine and forward appropriate positions to: **Workers Compensation Claims Manager details:** Name: **Contact Number:** Email:



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#### APPENDIX 4 Letter confirming suitable employment goal

Date: Name Address

Dear XXX

As per our previous discussion, please find attached a copy of the approved suitable employment goal agreed by yourself and Dr XXX via your recent Vocational Assessment.

As per SESLHDPR/279 – Redeployment of Injured Employees under Worker's Compensation, your recovery at work programme will now assist you in achieving appropriate placement in suitable employment.

As part of this process, your profile in Recruitment and Onboarding (ROB) profile will be updated for a period of twelve (12) weeks from the date of this letter. This will ensure you are given priority assessment should a suitable vacancy arise.

Your Recovery at Work Coordinator will continue to support you in this process.

If you have any concerns or questions regarding this process, please do not hesitate to contact your Workers Compensation Claims Manager, XXX, on XXXXXX or your allocated Human Resources Advisor, XXX on XXXX.

Yours sincerely

#### Name

#### **Recovery at Work Coordinator**

Attached: SESLHDPR/279 – Redeployment of Injured Employees under Worker's Compensation

cc Nominated Treating Doctor Employers Mutual Limited Human Resources Advisory Services



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## **APPENDIX 5 Priority Assessment Timeframes**

| Day   | Action                                                                                                                          | Responsible Officer/s                                                         |
|-------|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|
| Day 1 | Match made by COB                                                                                                               | Recovery at Work Coordinator and Workers Compensation Claims Manager          |
| Day 2 | Injured employee contacted and asked to submit resume and application addressing selection criteria.  Criteria and JD provided. | Recovery at Work Coordinator and Workers Compensation Claims Manager          |
|       | Interview scheduled for Day 5.                                                                                                  | Hiring Manager and Human<br>Resources Advisor                                 |
| Day 3 | Injured employee submits resume to Convener, Recovery at Work Coordinator and Human Resources Advisor.                          | Injured employee                                                              |
| Day 4 | -                                                                                                                               | -                                                                             |
| Day 5 | Priority assessment interview held. Referees contacted.                                                                         | Hiring Manager and interview panel                                            |
| Day 6 | Priority Assessment Report prepared. Approvals and sign-off obtained.                                                           | Hiring Manager                                                                |
| Day 7 | Injured employee informed of result.  Meeting arranged to provide Priority Assessment Report and discuss outcome if required.   | Hiring Manager Recovery at<br>Work Coordinator and Human<br>Resources Advisor |



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### **APPENDIX 6 Redeployment Position Matching Referral Form**

(This form is to be sent to the Hiring Manager for this position)

| Position Details:                         |                               |                  |
|-------------------------------------------|-------------------------------|------------------|
| Position title:                           |                               |                  |
| Classification / grade:                   |                               |                  |
| Location:                                 |                               |                  |
| Position status (Perm / Temp / FT /PT)    |                               |                  |
| ROB Requisition number:                   |                               |                  |
| Position number:                          |                               |                  |
| Salary / salary range:                    |                               |                  |
|                                           |                               |                  |
| Injured employee details:                 |                               |                  |
| Name:                                     |                               |                  |
| Classification:                           |                               |                  |
| Salary / salary range:                    |                               |                  |
| Current salary point:                     |                               |                  |
| Contact number(s):                        |                               |                  |
| Email address:                            |                               |                  |
|                                           |                               |                  |
| Recovery at Work Coordinator:             |                               |                  |
| Name:                                     |                               |                  |
| Contact Number:                           |                               |                  |
| Email:                                    |                               |                  |
|                                           |                               |                  |
| Human Resources Advisor:                  |                               |                  |
| Name:                                     |                               |                  |
| Contact Number:                           |                               |                  |
| Email:                                    |                               |                  |
|                                           |                               |                  |
| Checklist:                                |                               |                  |
| □ Vacancy corresponds to approx           | ved suitable employment       | goal             |
| ☐ Injured worker was assessed a           | against ALL available posi    | tion information |
| (selection criteria, physical req         |                               |                  |
| ☐ Grading / classification compa          | rative to pre-injury positior | ı                |
| ☐ Remuneration 80-100% of inju            | red employees pre-injury      | award            |
|                                           | . , , , , ,                   |                  |
| Priority assessment recommended           | ☐ YES                         | □ NO             |
| (please circle)                           |                               |                  |
| If no, please specify reasons and file on | InjuryConnect:                |                  |
|                                           |                               |                  |
|                                           |                               |                  |
|                                           |                               |                  |



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**APPENDIX 7 Priority Assessment Report** 

PRIORITY ASSESSMENT REPORT (This form is to be returned to the recovery at Work Coordinator or Human Resources Advisor of the injured employee)

**Details of position being assessed** Position title: Classification / grade: Location: Position status (permanent / temporary / full time / part time): **ROB Requisition number:** Position number: Injured worker details: Name: Email address: Home organisation: Claim number: Assessment date: **Recovery at Work Coordinator:** 

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**Human Resources Advisor:** 

8.

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| Skills assessment:                                   |                 |                                                                                                                                                   |          |                 |
|------------------------------------------------------|-----------------|---------------------------------------------------------------------------------------------------------------------------------------------------|----------|-----------------|
| Selection criteria (as per attached Job Description) | Met<br>criteria | If no, what training / support may be provided to assist applicant to meet criteria (Please specify training type, duration and expected outcome) |          |                 |
|                                                      | Yes/No          | INT – internal training EXT – external training OTJ – on the job training                                                                         |          |                 |
|                                                      |                 | Training / Course name / Task                                                                                                                     | Duration | INT / EXT / OTJ |
| 1.                                                   |                 |                                                                                                                                                   |          |                 |
| 2.                                                   |                 |                                                                                                                                                   |          |                 |
| 3.                                                   |                 |                                                                                                                                                   |          |                 |
| 4.                                                   |                 |                                                                                                                                                   |          |                 |
| 5.                                                   |                 |                                                                                                                                                   |          |                 |
| 6.                                                   |                 |                                                                                                                                                   |          |                 |
| 7.                                                   |                 |                                                                                                                                                   |          |                 |

| Fitness to p                                  | perform the role                                                                                             |
|-----------------------------------------------|--------------------------------------------------------------------------------------------------------------|
| Job Demands Checklist (critical requirements) | Met medical restrictions on current WorkCover Certificate of Capacity (yes or no)? If no, state restriction. |



1.

## Injury Management – Redeployment of Injured Employees under Workers Compensation Procedure

| 2.                                 |           |
|------------------------------------|-----------|
| 3.                                 |           |
| 4.                                 |           |
| 5.                                 |           |
| Insert additional rows as required |           |
| Refere                             | ee report |
| Date:                              |           |
| Referee Name:                      |           |
| Title:                             |           |
| Role:                              |           |
| Summary:                           |           |
|                                    |           |
|                                    |           |
|                                    |           |
|                                    |           |
|                                    |           |
|                                    |           |



## Injury Management – Redeployment of Injured Employees under Workers Compensation Procedure

| Date:                             |               |                   |
|-----------------------------------|---------------|-------------------|
| Referee Name:                     |               |                   |
| Title:                            |               |                   |
| Role:                             |               |                   |
| Summary:                          |               |                   |
|                                   |               |                   |
|                                   |               |                   |
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|                                   |               |                   |
|                                   |               |                   |
| Insert additional rows as require | 2d            |                   |
| moort additional rows as require  |               |                   |
| Work trial:                       | ■ Appointable | □ Not Appointable |
| Rationale:                        |               |                   |
|                                   |               |                   |
|                                   |               |                   |
| Ongoing placement:                | ■ Appointable | □ Not Appointable |
| Rationale:                        |               |                   |
|                                   |               |                   |
|                                   |               |                   |



## Injury Management – Redeployment of Injured Employees under Workers Compensation Procedure

| Selection Panel Members:                     |               |
|----------------------------------------------|---------------|
| Hiring Manager:                              | Panel Member: |
| Signature:                                   | Signature:    |
| Date:                                        | Date:         |
| Panel Member:                                |               |
|                                              |               |
| General Manager/Service Director endorsement |               |
| Name:                                        |               |
| Signature:                                   |               |
| Date:                                        |               |
|                                              |               |



## Injury Management – Redeployment of Injured Employees under Workers Compensation Procedure

SESLHDPR/279

| APPENDIX 8 | <b>Performance</b> | review template |
|------------|--------------------|-----------------|
|------------|--------------------|-----------------|

Week commencing.....

| Performance/ Training goal | Training and / or corrective action required | Date to be completed: dd/mm/yy | Review<br>conducted:<br>dd/mm/yy | Comments | Initialled<br>Employee<br>/ manager |
|----------------------------|----------------------------------------------|--------------------------------|----------------------------------|----------|-------------------------------------|
|                            |                                              |                                |                                  |          |                                     |
|                            |                                              |                                |                                  |          |                                     |
|                            |                                              |                                |                                  |          |                                     |
|                            |                                              |                                |                                  |          |                                     |
|                            |                                              |                                |                                  |          |                                     |
|                            |                                              |                                |                                  |          |                                     |
|                            |                                              |                                |                                  |          |                                     |



Injury Management – Redeployment of Injured Employees under Workers Compensation Procedure

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#### **APPENDIX 9 Letter Advising of Cessation of Work Trial**

Date: Name Address

Dear XXX,

As per our previous discussion, I regret to inform you that the work trial in XXX Department must cease as of xx xxx 20xx.

The reasons for the work trial not being successful are as follows:

- 1. xxx
- 2. xxx
- 3. xxx

Should you wish to appeal these findings, please contact your Recovery at Work Coordinator, XXX, on XXXXXX or your allocated Human Resources Advisor, XXX on XXXX.

As per SESLHDPR/279 – Redeployment of Injured Employees under Worker's Compensation, there are a further xxx weeks to find an additional suitable work trial within SESLHD.

Your Recovery at Work Coordinator will continue to support you in this process. You may also seek the support of the Employee Assistance Program. To make an appointment or speak to a consultant, call 1300 687 327.

. . . . . . . . . . . . [OR] alternate phrasing:

As per SESLHDPR/279 – Redeployment of Injured Employees under Worker's Compensation, the twelve week period of internal job-seeking is now exhausted [OR] you have been unsuccessful in three (3) work trials. Your occupational rehabilitation provider will continue to seek redeployment opportunities for you external to SESLHD. You may also seek the support of the Employee Assistance Program. To make an appointment or speak to a consultant, call 1300 687 327.

However, should you identify a suitable employment position in the coming months, please advise the Workers Compensation Claims Manager, who will re-refer you to

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## Injury Management - Redeployment of Injured **Employees under Workers Compensation Procedure**

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| the Recovery at Work Coordinator to arrange the assessment of the position, you |
|---------------------------------------------------------------------------------|
| suitability for the position, and work trial.                                   |
| End of alternate phrasing                                                       |

Yours sincerely

#### **Workers Compensation Claims Manager**

Attached: SESLHDPR/279 – Redeployment of Injured Employees under Worker's Compensation

cc Nominated Treating Doctor **Employers Mutual Limited** Human Resources Advisory Services Occupational Rehabilitation Services Provider [if required]