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| STUDENT ASSESSMENT TASK PORTFOLIO |

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Rehabilitation and Return to Work Coordinator Course  Name: |



**Sections**

Section 1 – Theory Questions

Section 2 – Practical Assignment

Summary Sheet

**Assessment Requirements**

This assessment document has been approved by the Workers Compensation Regulator as an approved course for rehabilitation and return to work coordinators in Qld. Most other State and Territory bodies recognise the National Statement of Attainment you will receive upon successful completion of this course.

The assessment activities in this Assessment Task Portfolio assess all the elements, performance criteria, skills and knowledge of the unit of competency BSBWHS417 Assist with managing WHS implications of return to work. Successful completion of the assessment will also result in obtaining a return to work coordinator card.

To demonstrate competence in this unit you must undertake all tasks in this Assessment Task Portfolio and complete them satisfactorily as well as successfully complete your work placement. If you do not answer some questions or perform some tasks, you will be deemed ‘Not Competent’, and your trainer / assessor may ask you supplementary questions to determine your competence. In addition to completing all tasks satisfactorily, you will also be required to demonstrate satisfactory communication skills during some practical activities. Once you have demonstrated successful completion and consistency in performance, you will be awarded this unit.

Should you still be deemed *Not Yet Competent* you will have the opportunity to undertake a supplementary assessment or appeal the result.

As part of the assessment process, all students must abide by any relevant assessment policies as provided during induction.

If you feel you are not yet ready to be assessed or that this assessment is unfair please contact your assessor to discuss your options.

However if you are ready to submit your assessment, please submit your assessment via email to [rrtwc@ohsa.com.au](mailto:rrtwc@ohsa.com.au) or by post to:

OHSA - RRTWC Assessment Submission

PO BOX 336

ELANORA QLD 4221

* Please tick this box if you understand the assessment instructions and requirements, and consent to being assessed. By signing this acknowledgement, you will also be verifying and assuring the RTO that the work you submit is your own work.

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| Student’s Name: |  | | |
| Student’s signature |  | Date: |  |

**Section 1 – Theory Questions**

**Instructions to the Student**

Please read all the information given to you before you start any assessment task. If you do not understand some or all of the questions, please ask your trainer / assessor for assistance. If you are uncomfortable with any of these questions, please contact your assessor who will make alternative arrangements. Attempt to answer **ALL** questions in your own words on the assessment paper provided. The questions are designed to assess your understanding of the unit as well as your underpinning knowledge.

To satisfactorily complete this assessment task, you are required to complete the whole assessment. To do this you will need to answer all questions correctly and demonstrate you have achieved the required knowledge to industry standards. This assessment is intended to be equitable, fair and flexible. If you feel that we should change any aspect of this assessment to be fair, equitable or flexible, immediately contact your assessor who will attempt to make alternative arrangements.

**Please Note:**

1. This assessment may be re-assessed upon appeal
2. Upon notification of your assessment results, your trainer/assessor is able to provide you with additional information on interpreting the assessment outcomes and guide you on your future options.

### **FORMATIVE ASSESSMENT – THEORY QUESTIONS**

Question 1:

Each state and territory in Australia has their own workers' compensation scheme. What are two other Australian workers' compensation schemes that are not state based?

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Question 2:

Who are the workers' compensation insurers in Queensland?

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Question 3:

Fill in the blanks.

*(This question is not word for word in the workbook, you will need to answer it based on your*

*understanding)*

WorkCover Queensland provides information about ............................. compensation

insurance and ........................ calculation and payment and lodgement of ................................ for workers' compensation.

Question 4.

What is the title and year of the Queensland Act that sets out arrangements for workers' compensation in Queensland?

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Question 5.

What is the title and year of the accompanying Queensland Regulation?

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Question 6.

List five objectives of the Queensland workers' compensation scheme (briefly in your own words). Eg. 1. i.e. Workers treated fairly

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Question 7.

What are the restrictions on release of information about injured workers as set out in s572 of the Act (briefly in your own words)?

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Question 8.

Explain briefly in your own words the formal dispute resolution processes within the workers compensation scheme in Queensland (briefly in your own words).

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Question 9.

List 3 functions (see Regulation No. 114) a rehabilitation & return to work coordinator (RRTWC) has for workplace rehabilitation following a work-related injury. e.g. 1. Co-ordinate the worksite suitable duties program

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Question 10.

List the relevant sections of the Workers Compensation and Rehabilitation Act or Regulation Qld for the following topics:

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| Item | Act | Reg | Section No (e.g*. S.11)* |
| Tick (🗸)  Relevant Section | |  |
| *Eg. Objects of the Act* | *🗸* |  | *s4* |
| Meaning of Injury |  |  |  |
| Meaning of Rehabilitation |  |  |  |
| Meaning of Suitable Duties |  |  |  |
| Meaning of Normal Weekly Earnings |  |  |  |
| Am I an interstate worker or Qld worker |  |  |  |
| What if a dentist, doctor or nurse practitioner not available to complete the medical certificate |  |  |  |
| What are the Functions of a Rehabilitation and Return to Work Co-ordinator |  |  |  |

Question 11.

What type of assistance is available from WorkCover for both injured workers and or employers? Please list at least three dot points.

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Question 12.

What is the main injured worker obligation for workplace rehabilitation?

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Question 13.

Name two injured worker reporting requirements related to workers' compensation.

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Question 14

What is the employer's workers' compensation reporting requirement following a workplace injury?

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Question 15.

List two (2) rights and obligations (responsibilities) of the worker and employer under the workers' compensation scheme and legislation.

Injured Worker

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| --- | --- |
| Rights | Obligations |
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Employer

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| Rights | Obligations |
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Question 16.

Explain the processes of a workers' compensation claim.

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Question 17.

List the main steps for employers upon receipt of a claim.

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Question 18.

Name 3 commitments the employer should include when writing a Workplace Rehabilitation Policy Statement.

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| Eg.1. Provide Suitable Duties |
| 2. |
| 3. |

Question 19.

Discuss briefly in your own words the dispute resolution processes is at your workplace according to your organisations policy and procedures. (briefly in your own words).

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Question 20.

How should the worker's medical information obtained during rehabilitation be treated?

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Question 21.

What should the RRTWC or employer get from the worker before obtaining or releasing information about the worker?

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Question 22.

Employers usually want to commence a return to work plan as soon as possible, but before this happens, what must they get first from the injured worker's treating medical doctor before a worker can commence a return to work program?

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Question 23.

What is the definition of suitable duties (briefly in your own words)?

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Question 24.

When developing a suitable duties program who would be the main stakeholder that the employer should consult?

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Question 25.

Match the type of injury in the left hand column with the corresponding descriptor in the right column. An example has been completed for you.

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| Type | Description |
| 1. *Strain* | A fracture in which the break across the bone is incomplete. |
| 1. Sprain | A fracture in which the break across the bone is complete, so that the bone is broken into separate pieces. |
| 1. Dislocation | This refers to the situation where the jelly-like centre of the intervertebral disc protrudes outside of the fibrous outer ring. |
| 1. Partial Fracture | 1. *Overstretching of a muscle.* |
| 1. Complete Fracture | Wrenching or twisting of a joint with partial rupture of joint structures (e.g. meniscus, membrane or bursa) or other attachments (e.g. ligaments). |
| 1. Disc Herniation | Displacement of a joint (may be with tearing of the surrounding soft tissues). |

Question 26

Complete the blanks

You must always aim to ...................................a hazard, which is the most effective control. PPE and

.................................... controls should be seen as a back-up or supplementary control.

Question 27.

What section of the WHS Act and which Part of the WHS Regulation outlines the requirements for managing risks? Below table can be copy and pasted into your answer. LEGISLATION Section or Part

WHS Act 2011 .......................... WHS Regulation 2011 ..........................

Question 28.

If you are unsure about a potential hazard/s that may be present in a task who could you consult with in your organsiation? List at least two different groups or positions.

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Question 29.

List the 4 key steps in the risk management process that should be followed when developing suitable duty plans when a new or adjusted task is suggested for the injured workers.

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Question 30.

List two (2) ways the workplace could facilitate regular contact/support between the worker and rehabilitation co-ordinator / rehabilitation provider.

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Question 31

Considering a person centered approach and motivational interviewing practices how could you gain and maintain the commitment of an injured worker in their return to work?

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Question 32

Why is it important to analyze your company's claims experience (including type of injury, body part injured, cause, duration of claim, claim outcome, insurance premium trends etc.) and provide advice to your company?

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Question 33.

What process could the workplace have to identify and notify breaches of the return to work program and what action/s could be taken to appropriately address those breaches?

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Question 34

List three (3) things you could do to modify a return-to-work program when a worker is having difficulty with the program (i.e. reduce hours).

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Question 35.

When evaluating the rehabilitation or return-to-work program and implementing recommendations for future programs, list **three** (3) items that might be discussed / considered (i.e. all stakeholders having a copy of the suitable duties program).

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Question 36.

What is an organisations overall rehabilitation and return-to-work program and what should it include?

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Question 37.

List three services which may be available to facilitate a return to alternative employment if a worker is unable to return to their pre-injury employment?

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Question 38.

List three impacts on workers and also employers. You may also consider the biopsyhosocial model for the injured worker.

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| Impacts of an injury for an injured worker | Impacts of an injury for an employer |
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Question 39.

Go to Workcover Website at <https://www.worksafe.qld.gov.au/laws-and-compliance/workers-compensation-laws/workcover-queensland-industry-classifications> and download the CURRENT WorkCover Queensland industry classifications. List which WIC code you think your employer’s predominant business activity is and list what the Workcover premium rate is for that WIC code per $100/wages. List also the industry with the highest premium rate in $per/$100 wages.

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| WIC Code | Industry Type | $ /$100 wages |
| Example: 012104 | Eg. Mushroom Growing | *Eg.$2.592 $per $100 wages* |
| Yours: |  | $per/$100 wages |
| Highest: |  | $per/$100 wages |

Question 40.

What is a functional capacity evaluation and when would it be used?

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Question 41

Go to Workcover website or conduct your own research and explain in your own words briefly what the purpose of a Medical Assessment Tribunal is.

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Question 42.

In order to process and accept a worker's compensation claim according to the Worker's Compensation Act Qld 2003 the insurer will need to determine which of the following?

2003 the insurer will need to determine which of the following?

1. Whether the claimant is a ‘worker’ as defined in s.11 ‘Who is a worker’
2. Whether the worker is defined as a ‘Queensland’ Worker.
3. Whether the injury meets the definition ‘Meaning of injury’
4. Whether the claim has been lodged within the approved time.
5. Whether the claim has been made in the approved form
6. All of the above

Question 43.

Which of the following should be considered before notifying and or engaging a rehabilitation provider?

1. Whether the claimant is a ‘worker’ as defined in s.11 ‘Who is a worker’
2. Whether the worker is defined as a ‘Queensland’ Worker.
3. Whether the injury meets the definition ‘Meaning of injury’
4. Whether the claim has been lodged within the approved time.
5. Whether the claim has been made in the approved form
6. All of the above

Question 44.

What document can indicate how long the worker may be absent or on restricted duties?

1. Workers Compensation Annual Statistics Report
2. Incident Report
3. Work Capacity Certificate (Medical Certificate)
4. None of the above

Question 45.

If a worker is going to be absent from the workplace for an extended period of time what considerations / planning might the company need to do deal with that absence.

1. Review the person’s job description to identify what tasks need to be completed and what competencies are required.
2. Consider using either existing labour or casual labour to cover for the worker’s absence
3. Investigate whether the injured worker can do some of the duties on a suitable duties return to work program with the treating doctor’s approval
4. Potential risks of other team members due to possible increase workload and stress during the absence
5. All of the above

Question 46

What form (signed by the injured worker) could be used to facilitate consultation between the rehabilitation provider, the treating doctor and other relevant stakeholders?

1. The WHS Incident Investigation Policy
2. The Injured Worker Authorization Form (authorizing treating professionals to communicate with the injured worker’s rehabilitation co-ordinator about their injury and status).
3. The First Aid Code of Practice
4. The Job Safety Analysis

Question 47

Which of the following might be important matters to ensure consultation between the injured worker, rehabilitation provider and the workplace management?

1. All stakeholders are aware of and understand the company’s rehabilitation policy and procedures and their roles and responsibilities as outlined in the Rehabilitation Policy and Procedure.
2. Communication should only go via the Insurer’s Case Manager / Advisor / Claims Representative.
3. Communication between all relevant stakeholders only if there are issues with the program.
4. All of the above.

Question 48

In order to assist with return to work planning which of the following would be considered important?

1. Understanding the worker’s position description (job) requirements
2. Understanding the workers current experience, skill, competency, knowledge and capabilities
3. Understanding the worker’s job and alternative work that may be suitable
4. Principles of good work
5. All of the above

Question 49

If a worker is initially unavailable to return to work due to the restrictions on the medical certificate, consideration should be given to investigating whether the workplace could offer alternative work. In order to facilitate this which of the following should be considered?

1. Review the medical certificate and consider offering reduced hours, alternative duties and possibly job redesign / modifications including addressing safety concerns.
2. Allowing the worker to come back only if they can do full time hours.
3. Considering offering alternative duties only if it has some productivity benefit to the employer.
4. All of the above

Question 50

To ensure a successful return to work through a rehabilitation or return-to-work program which of the following needs to be addressed / documented on the program?

1. Duties to be performed (capabilities)
2. Task to be avoided (restrictions)
3. Dates and hours to be completed
4. Stakeholders contact details
5. All of the above

Question 51

It is important that the injured worker’s supervisor / line manager is consulted regularly throughout the program to get their approval, to address any issues and ask for assistance with the monitoring of the program.

True / False

Question 52

As part of an organisations rehabilitation and return to work policies and procedures which of the following should be included/outlined?

1. Methods to verify information obtained from injured workers
2. Facilitating injured workers return to work
3. Protocols for liaising with medical professionals
4. Processes for conducting risk assessments on work environments
5. Methods/frequency for monitoring programs
6. How to respond to non compliances
7. All of the above

Question 53.

After a risk control has been implemented there may be residual risks or hazards that may still be present?

True / False

Question 54.

Which of the following should be considered, in consultation with the injured worker, when establishing a rehabilitation or return-to-work program.

1. The current workers compensation medical certificate including capabilities and restrictions
2. The availability of suitable duties at the workplace
3. Safety concerns around new risks to the injured worker and their team members.
4. The workers skills, experience and knowledge and motivation to return to work
5. Any barriers the worker or the employer have identified for a return to work
6. Understanding biopsychological impacts of an injury on a worker
7. All of the above

Question 55

Which of the following could be ways to facilitate regular feedback and communication between provider, supervising manager and worker?

1. Holding a team meeting with the worker and relevant stakeholders at the commencement of the program to ensure everyone understands their role / responsibilities to the program and conducting regular reviews of the program’s success.
2. Conducting reviews only if things are going wrong.
3. Making notes in the injured worker’s case file only if progress isn’t being made.
4. All of the above

Question 56.

Which of the following might be appropriate when selecting rehabilitation options and providers:

1. Review the medical certificate and if unsure about what the doctor is suggesting, contact him / her to clarify their requirements
2. Consult with the workers insurer’s case manager / claim representatives if you are uncertain about the appropriate rehabilitation provider
3. Seek advice from a rehabilitation provider if you are unsure about the rehabilitation services / options
4. all of the above

Question 57

Which of the following processes could be used to decide on options for alternative duties.

1. Reviewing the Doctors Work Capability Checklist / Medical Certificate to determine workers’ capabilities and restrictions
2. Conducting a job task analysis of the worker’s job to determine if there are certain tasks that the worker could perform safely
3. Engage a rehabilitation provider to conduct a worksite visit to conduct a functional capacity evaluation of the worker and develop a suitable duties program in consultation and agreement with the relevant stakeholders.
4. All of the above.

Question 58

Which of the following processes could be used to prepare the workplace for return-to-work.

1. Develop a suitable duties program in consultation with relevant stakeholders and give a copy only to the worker.
2. Schedule a meeting on the first day prior to commencement of the program to make sure the worker knows that if they don’t follow the program they will get sacked.
3. Ensure the worker is inducted and if necessary, retrained, if they are returning to different work or to a different work area.
4. Thorough risk assessment and implementation of appropriate controls
5. All of the above.
6. C and D only

Question 59

Individual factors which may impact upon a worker’s experience of their injury, and rate of recovery include which of the following:

1. previous injury to the same area
2. pre-injury physical capacity and strength
3. age
4. lifestyle factors (e.g. smoking, diet, sedentary versus active)
5. pre-injury job satisfaction (e.g. willingness to return to a position which is not satisfying)
6. All of the above

Question 60

You should never assume that because you have coordinated the rehabilitation of one worker with a particular injury, that the next worker with the same injury will follow the same path of recovery.

True/False

Question 61

What are the three segments of the spine?

A. Cervical Spine, Thoracic Spine, Lumbar Spine

B. Cervical Spine, Jurassic Spine, Meniscus Spine

C. Femur Spine, Thoracic Spine, Socket Spine

Question 62

What is the longest bone in the human body?

A. Femur

B. Lemur

C. Stapes

Question 63

True or False.

The rotator cuff is a group of tendons surround the shoulder joint. Together with the muscles they keep the upper arm bone seated in the shoulder socket.

True or False

Question 64

True or False.

A stress fracture is a tiny crack in the bone from overuse

True or False

Question 65

True or False

Under s 220 of the Act the insurer is responsible for coordinating, developing and maintenance of a return to work plan for a injured worker and the employer is responsible for developing suitable duties.

True or False

Question 66

True or False

After implementing a risk control relating to suitable duties there may still be risidual risk which needs to be considered prior to allowing an injured worker to undertake that task?

True or False

Question 67

What are five health benefits of good work and how can they benefit the worker when identifying suitable duties.

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| How can these be used to benefit the worker when the RRTWC is developing suitable duties. |
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**Section 1 – Formative Theory Questions – Result**

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| **Question** | **Answered Correctly** | **Comments** |
| **Question 1** | Y |  |
| **Question 2** | **Y** |  |
| **Question 3** | **Y** |  |
| **Question 4** | **Y** |  |
| **Question 5** | **Y** |  |
| **Question 6** | **Y** |  |
| **Question 7** | **Y** |  |
| **Question 8** | **Y** |  |
| **Question 9** | **Y** |  |
| **Question 10** | Y |  |
| **Question 11** | Y |  |
| **Question 12** | Y |  |
| **Question 13** | Y |  |
| **Question 14** | Y |  |
| **Question 15** | Y |  |
| **Question 16** | Y |  |
| **Question 17** | Y |  |
| **Question 18** | Y |  |
| **Question 19** | Y |  |
| **Question 20** | Y |  |
| **Question 21** | Y |  |
| **Question 22** | Y |  |
| **Question 23** | Y |  |
| **Question 24** | Y |  |
| **Question 25** | Y |  |
| **Question 26** | Y |  |
| **Question 27** | Y |  |
| **Question 28** | Y |  |
| **Question 29** | Y |  |
| **Question 30** | Y |  |
| **Question 31** | Y |  |
| **Question 32** | Y |  |
| **Question 33** | Y |  |
| **Question 34** | Y |  |
| **Question 35** | Y |  |
| **Question 36** | Y |  |
| **Question 37** | Y |  |
| **Question 38** | Y |  |
| **Question 39** | Y |  |
| **Question 40** | Y |  |
| **Question 41** | Y |  |
| **Question 42** | Y |  |
| **Question 43** | Y |  |
| **Question 44** | Y |  |
| **Question 45** | Y |  |
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| **Question 58** | Y |  |
| **Question 59** | Y |  |
| **Question 60** | Y |  |
| **Question 61** | Y |  |
| **Question 62** | Y |  |
| **Question 63** | Y |  |
| **Question 64** | Y |  |
| **Question 65** | Y |  |
| **Question 66** | Y |  |
| **Question 67** | Y |  |

Student Comments – Specify any improvement you could recommend relating to this assessment.

Assessment Results (circle one)

Satisfactory / Not Satisfactory

Assessors Comments about the assessment (include any details of reasonable adjustment or other consideration)

**Section 2 – SUMMATIVE ASSESSMENT – PRACTICAL TASKS**

**General Instructions:**

The summative assessments are designed for the trainer to see practical demonstration of key competencies as per the mandated unit of competency.

The course trainer/assessor will guide you through these activities in groups or as a whole class. Please ensure you sign all relevant pages of this part of the assessment as indicated.

The activities will be based on the information provided at the course by your trainer. You may need to do research by accessing documents, legislation, industry guides, handouts etc throughout your course.

Additional information regarding case study etc is at the end of this document.

# Practical Tasks

**Case Study – NEVILLE IMAN**

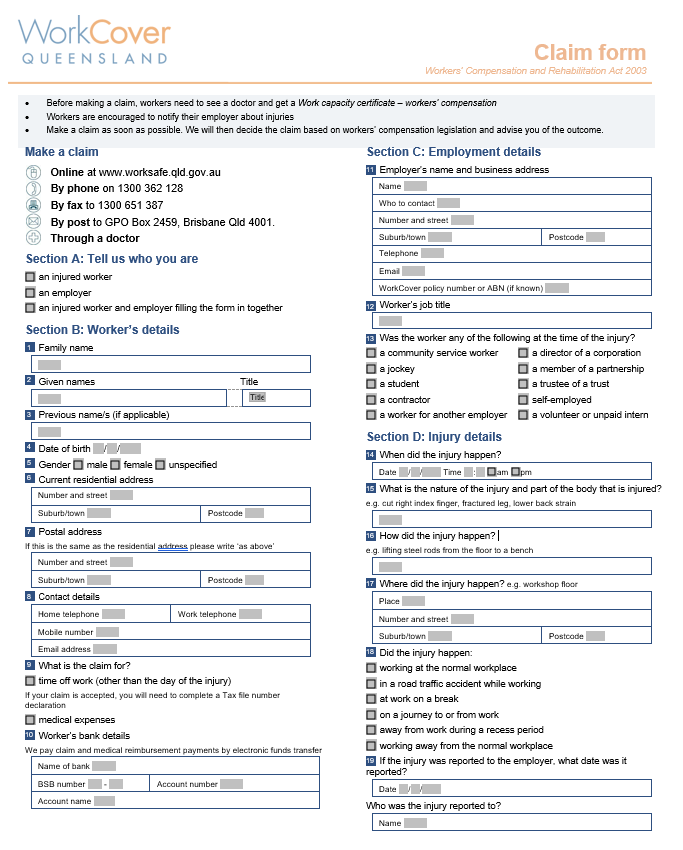
**Task 1 – Review Work Capacity Certificate, Complete Work Cover Claim Form & Manage Absence & Notify Worker.**

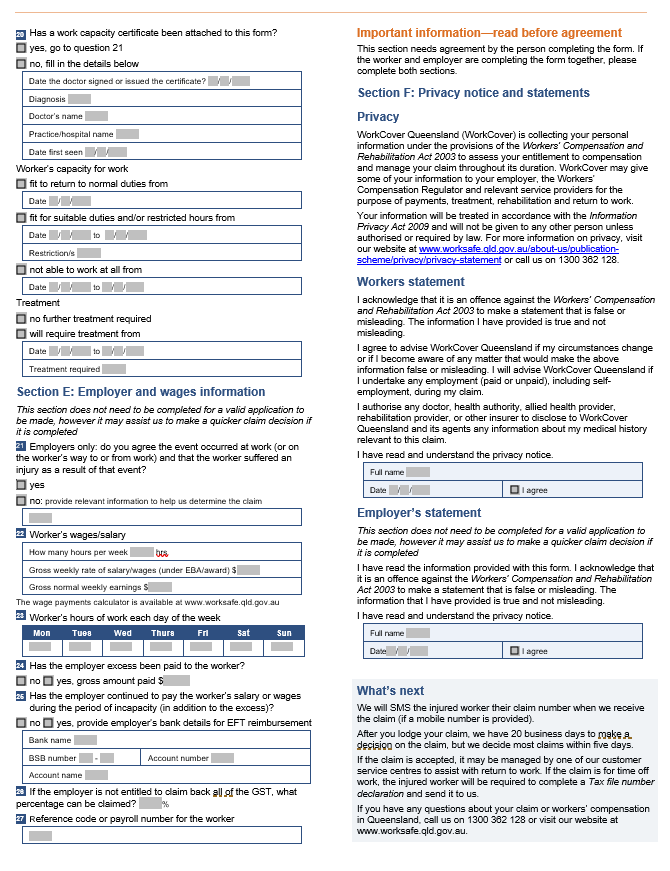
You are to review Case Study – Hand Injury to Neville Iman – attached at end of this document.

You are to complete the Workers Compensation Claim Form to the Insurer for Neville’s injury as the Employer. Most of the information needed can be found in the case study at the end of this document. Creative licence is allowed for information that may be missing.

You will then be asked some follow up questions in regard to the case, including developing case notes on hypothetical conversations you would have held. The question scenario paints a clear picture to assist you in drafting appropriate case notes.

**Question 67 Complete WorkCover Claim Form – below, or via the following link** <https://www.worksafe.qld.gov.au/claims-and-return-to-work/make-a-claim> and attach to this document





**Identify application timeframes and ways to submit claim.**

**Question 68**

How long does the Employer in this scenario have to notify the insurer of a work compensable injury in accordance with the Worker’s Compensation and Rehabilitation Act 2003 Qld?

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**Question 69**

After he has seen the Doctor, how long does the Worker (Neville) have to notify the insurer of a work compensable injury in accordance with the Worker’s Compensation and Rehabilitation Act 2003 Qld?

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**Question 70**

What is the usual process by insurer for notifying a worker of their claim acceptance and if the worker has not yet been informed of the claim acceptance (however the employer had) how would you advise the worker of the claim acceptance and what information would you convey to the worker about the claim acceptance.

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**Question 71**

What are the ways you can submit this WorkCover Claim Form? List 3.

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**Question 72**

What things may be required to prepare the workplace/work area/work team for an injured worker’s return to work?

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**Question 73**

As the RRTWC what methods, techniques and tools could you use to support Nevelle in his return to work? **Also consider how motivational interviewing and the biopsychosocial model can assist.**

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**Question 74 Case File Note of Conversation with Neville’s Supervisor – Jimmy Dean – regarding Neville’s period of absence and strategy outcome negotiated with Employer (Jimmy).**

Include in your response some strategies that could be implemented to remove any risks to Neville’s co-workers due to his reduced work capacity and additional time off.

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**Question 75**

**You have performed an inspection of the workshop where Neville may be completing some of his sorting work during his rehabilitation.**

You are concerned that the boxes are too heavy and many are second hand with carboard damage.

His doctor has said that he needs to be cautious of forceful grabbing with his injured hand. You are worried that Neville may injure himself further and lacks the confidence to stand up for his rights.

Outline to Jimmy Dean the WHS implications that may arise from Nevile working in this area as highlighted above and that you don’t think Neville has the confidence to stand up for his own safety as he is fearful of loosing his job.

Include in your notes any reasonable adjustment and controls that may need to be made to accommodate Neville’s safe return to work and a strategy for dealing with your concerns.

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**Question 76**

**Develop Job Task Analysis, Identify Skills, Experience and Capabilities and Develop Suitable Duties Program**

You are to locate / develop / or source a Job Task Analysis (JTA) for a Grocery Store Worker and add any additional comments if deemed necessary and **attach** to this document.

The following link may assist <https://www.worksafe.qld.gov.au/claims-and-return-to-work/rehabilitation-and-return-to-work/suitable-duties/resources-to-identify-suitable-duties>

**Question 77**

You are to identify and document Neville’s existing skills, experience and capabilities so that you can develop a Suitable Duties Program / Rehabilitation and Return to Work Plan.

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| Neville’s Experience |
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| Existing Skills and Capabilities |
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**Question 78**

You are develop a two week Suitable Duties Program / Rehabilitation and Return to Work Plan, by reviewing the Work Capacity Certificate, JTA and relevant job / task details and worker’s capabilities, skills and experience. You should document any relevant job redesign requirements, reduced hours, alternative duties, including treatment requirements, review dates, deciding on any retraining requirements and any other relevant considerations in consultation with relevant stakeholders.

You should get each stakeholder to sign, including the Doctor (if required on the Work Capacity Certificate) and date the plan acknowledging that they have been consulted and agree to the program. You should attach your completed plan to this document.

**Suitable Duties Program / Rehabilitation & Return to Work Plan (For Question 78, using the attached WCMC)**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Injured worker details** | |  | **Plan details** | | | |
| **Worker** |  | Goal – long term: …… | | | |
| **Claim number** |  | Plan completed by: Employer/Provider/Insurer | | | |
| **Phone** |  | Objective of this plan: …… | | | |
| **Supervisor** | …… | Duration of this plan | | | |
| **Phone** | …… | From: | …… | To: | …… |
| **Treating medical practitioner** | | Fit for suitable duties (restricted return to work) | | | |
| .. | | From: | …… | To: | …… |
| **Phone** | …… | Job description: …… | | | |

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| --- | --- | --- |
| **Task details** | | |
| **Week** | **Duties** | **Restrictions** |
| Week 1 – commencing: …… | …… | …… |
| Days: …… |
| Hours: …… |

|  |  |  |
| --- | --- | --- |
| Week 2 – commencing: …… | …… | …… |
| Days: …… |
| Hours: …… |

|  |  |  |  |
| --- | --- | --- | --- |
| Treatment occurring during this plan (e.g. physiotherapy): | Training required: | Yes | No |
| …… | If ‘Yes’, given by: …… | | |
| Plan to be reviewed on: …… | Training given on: …… | | |

|  |  |
| --- | --- |
| **Signatures** | |
| **Treating medical practitioner:**  Dr Rivers | **Worker:** Neville Iman |
| I approve this plan. | I have been consulted about the content of this plan and agree to participate. |
| Signature: Doc Rivers | Signature: Nev Iman. |
| Date signed: …… | Date signed: …… |
| **Supervisor** | **Rehabilitation and return to work coordinator** |
| Name: Jimmy Dean | Name: …… |
| I agree to ensure this plan is implemented in the work area. | I agree to monitor this plan. |
| Signature: JDean | Signature: |
| Date signed: …… | Date signed: …… |

For more information on our privacy policy go to www.workcoverqld.com.au/Privacy.html

**Note to participants**: If a stakeholder is required to sign the SDP plan, please include their name as their signature.

**Question 79.**

**Maintaining regular contact, feedback and communications between provider, supervising manager and worker.**

You are required to document in your case note files records of your communications with the relevant stakeholders as part of the ongoing monitoring of Neville’s Rehabilitation. Case note the following discussions:

1. Email communication with Neville’s physiotherapist (Jenny Macklin) about Neville’s satisfactory progress with wound healing and his readiness to commence the SDP and he will only need 4 further consultations over the next 2 weeks.

2. Verbal conversation with Neville’s Supervisor, Jimmy Dean regarding his acknowledgement of the SDP and its commencement.

3. Phone call with Neville about him starting his SDP and confirmation that he has received the program and is aware of the start date, time, duties, restrictions and treatment requirements.

**Case File Note of Conversation with Jenny Macklin, Jimmy Dean, Neville Iman**

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**Question 80.**

**Conducting investigation of program breach and implementing appropriate strategies including modifying the program where appropriate.**

Jimmy Dean reports that Neville has gone missing from work on some of the days and feels he is breaching his duty to participate on purpose. You are required to investigate the breach and determine the cause and respond appropriately which may include modifying the plan and evaluating it for any improvements. After discussion with Neville, he reported that a new physiotherapist (Andrea Lamb) had taken over his treatment and that she only worked part-time at the physiotherapy practice so he had to change his treatment hours. He had failed to communicate this to Jimmy as he didn’t know he had to.

You are to document your investigation findings and case note the communications you have with Neville, Jimmy and the Physiotherapist and what strategies you have put in place to resolve the matter (the conflict), after consultation with the relevant parties to ensure this doesn’t happen again. Document here what modifications you would make on the program to communicate this change in treatment times including any changes to policies or procedures.

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**Question 81**

**Managing issues and implementing appropriate strategies in consultation with relevant stakeholders.**

Neville has approached you, in a quite angry manner. He reports that he is ‘going broke’ paying for his two (2) hand therapy sessions and doesn’t know what to do as he can no longer afford to go to therapy anymore and he is worried this will affect the recovery of his hand as he has seen the benefit of the hand therapy sessions.

You are to conduct an investigation into this matter which will include researching payment for therapy and provide feedback to Neville. You are to hold a **role play meeting / conversation** with Neville (played by the trainer) and sensitively address the matter and provide appropriate feedback to ensure a successful outcome. You should then document the following in your case notes.

1. who you spoke to,
2. what your investigation about payment of fees included,
3. what advice you provided to Neville,
4. success of the therapy intervention to date,
5. how the matter was to be resolved and
6. whether changes to the SDP and or governing policies/procedures would be required

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**Question 82.**

**Developing organisation resources to facilitate rehabilitation, providing advice to relevant stakeholders about benefits of rehabilitation and evaluating and implementing recommendations for system improvement.**

During the rehabilitation process it became apparent that there was a lack of understanding by the employer (supervisor/managers) and workers about the rehabilitation process. As a result you have have also identified the need to develop an Injured Worker Kit with necessary forms, policies and processes to assist with more efficient implementation of future programs. Please list below what forms, policies, processes you might include in the injured worker’s pack.

|  |
| --- |
| **An ‘injured workers pack’ should contain the following; Please list another 4.** |
| 1. eg. An injured workers/return to work process Flow Chart |
| 2. |
| 3. |
| 4. |
| 5. |

**Question 83**

Who are the individuals and parties with roles, duties and responsibilities relating to this case that you would have consulted with throughout the case? Some have been provided as a support.

|  |  |
| --- | --- |
| **Stakeholder** | **Roles/duty and or responsibilities** |
| 1. Eg. Neville Iman – Injured worker | Participate in rehab, communicate with RRTWC, attend appointments |
| 1. Doctor John Rivers |  |
|  |  |
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**Question 84.** Based on your consultation with stakeholders during this case study and understanding of the claims process, what barriers may occur during the process to get this injured worker back to work? **Please list three (3).**

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**Question 85** Neville Imans hand therapist has recommended a Functional Capacity Evaluation (FCE) is carried out to determine ongoing capacity whilst the injury improves. Draft an email to the insurer (and ‘cc’ his treating doctor) outlining the injured workers injury/progress so far and that a FCE has been recommended. The goal of the email is to seek approval for the therapist to carry out the FCE.

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**Question 86** As the safety advisor you have noticed the following trends in regard to fruit shop.

Your industry average is $3.157 per $100 of wages. Wage average for Lakeside employees is $40,000 per person. Total wages for the past financial year was $1M.

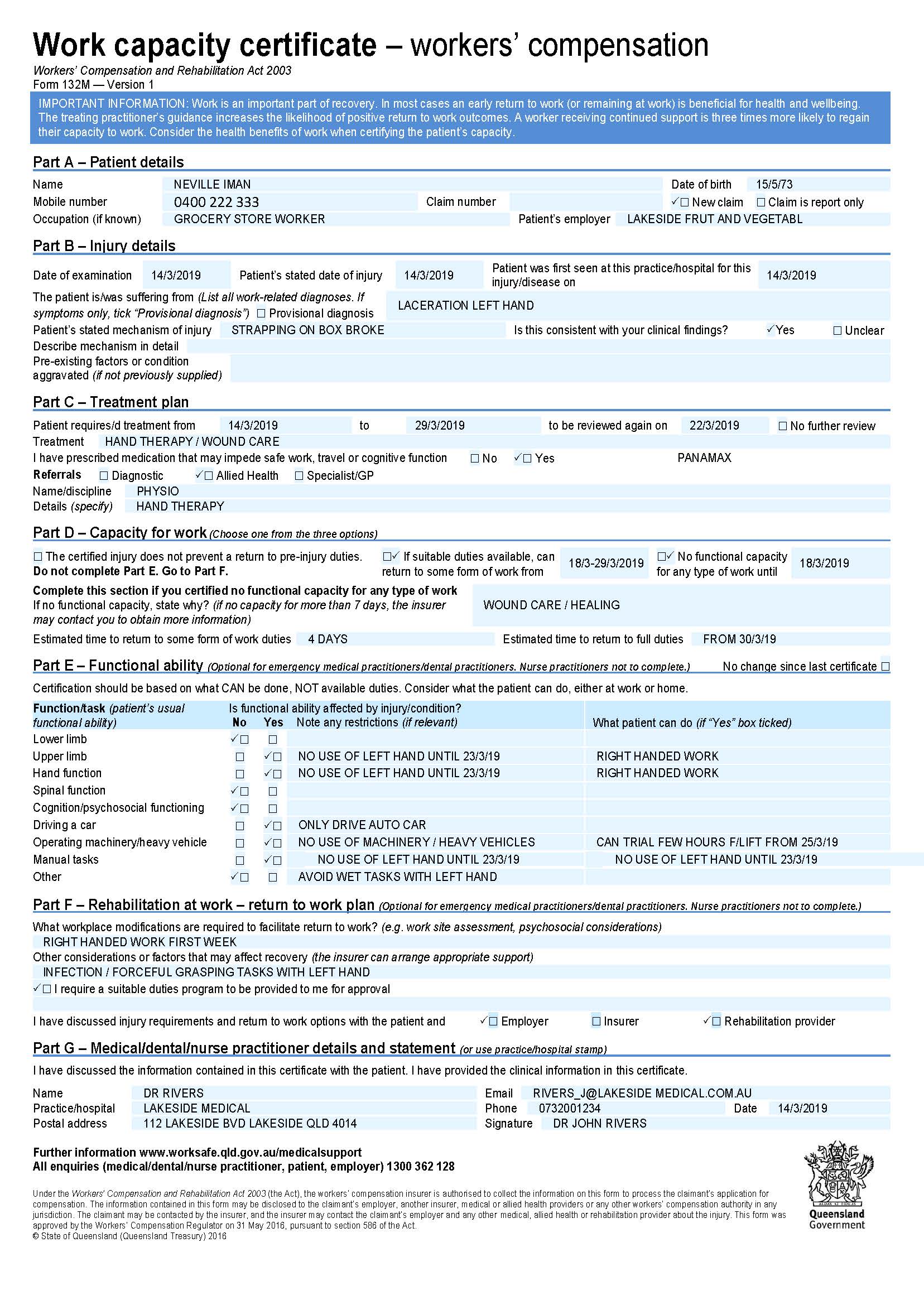
|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Year 1** | **Year 2** | **Year 3** | **Year 4 (Current)** |
| **No. of cuts** | 4 | 8 | 14 | 19 |
| **No. of hand injuries** | 2 | 5 | 6 | 9 |
| **Workcover premium per $100 of wages for Lakeside** | $3.157 | $3.30 | $4.05 | $5.10 |

You have also determined that employers and supervisors and workers really do not understand the rehabilitation process and your organisations policies and procedures and injured workers at Lakeside tend to have claims that are 8 days longer than average compared to industry average and that most claims usually have a Not Fit for Work component in the Work Capacity certificate - even for relatively minor injuries. Please outline key points about what you would suggest to the employer about what the business could do to increase awareness of the rehabilitation process, what matters the business might wish to focus on initially to improve the company’s incident statistics / worker’s compensation premiums and reducing the overall length and cost of Lakeside’s claims. In your review include information any reviews/risk assessments that may need to be conducted.

You are to outline key points that you would discuss in a  **role play** where you communicate / present your key improvement recommendations for the organisation’s rehabilitation systems and processes to your employer.

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END OF ASSESSMENT



**Section 2 – Summative Assessment - Practical Tasks – Result**

***Assessors use only***

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| --- | --- | --- |
| **Marking Criteria** | **Completed** | **Comments** |
| **Did the Student?** | | |
| Identify legislative requirements for facilitating injured worker’s return to work theoretically and apply throughout the case study including in developing suitable duties after injured workers period of incapacity. | Y |  |
| Use task 6 to Identify individuals and parties with roles, duties, rights and responsibilities regarding Nevillese return to work. | Y |  |
| Outlined elemetns of the injured workers pack to Identify relevant organisational policies and requirements for injured worker’s return to work | Y |  |
| **Did the Student?** | | |
| Used injured workers previous sills/abilities and the grocery store worker task analysis to assist with identifying suitable return-to-work duties for injured worker. | Y |  |
| Consulted with injured workers manager in case study tasks and used the overall process to Identify potential barriers for worker returning to work and documented barriers in task 6. | Y |  |
| Develop an appropriate suitable duties (return to work) program for Neville based on the provided work capacity certificate from the doctor. | Y |  |
| Consulted and advised injured workers manager possible/ potential WHS-related risks to other team members arising from workers reduced capacity and included control measures to manage these risks and documented in case notes provided. | Y |  |
| Role play/consulted with injured workers manager to establish agreement on injured worker’s return to work and control strategies that will need to be used to ensure safety of injured worker and team members. | Y |  |
| Review information after a review of the injured workers intended work environment for potential WHS-related risk and case noted concerns | Y |  |
| Consult injured workers supervisor about WHS implications of and concerns return to work, and assist with incorporating feedback as documented in case notes | Y |  |
| Provided advise as documented in the case notes to injured workers supervisor about WHS implications of return-to-work process and support for necessary adjustments that need to be made to the work area | Y |  |
|  | | |
| **Did the Student?** | Completed | Comments |
| Facilitate regular feedback and communication between the injured worker, workers supervisor, Physio and documented the regular discussions in appropriate case notes. | Y |  |
| Monitored the case outcomes identifying breaches of non attendance and consulted to determine reason/s. Dealt with the identified non compliance of not being at work appropriately after the investigation revealed a failure of communication. Monitored return to work and identified possible fiscal strain on worker after workers was found to be paying for services which should have been referred to insurer. | Y |  |
| Assist with taking action to address WHS hazards in the workshop and areas of non-compliance including failure to notify manager of change to appointment and documented appropriately via case notes and identified if the suitable duties plan needed to be adjusted after the non compliance. | Y |  |
| Provided accurate improvement recommendations based on the review/evaluation of the program outlined in task 6. | Y |  |

**Competency Summary Record Sheet**

Student Name:

Date of Assessment:

|  |  |  |
| --- | --- | --- |
| **Assessment** | **S / NS** | **Date** |
| 1. Theory Questions |  |  |
| 1. Practical Tasks Assignment |  |  |

**A competent result cannot be granted until all assessment tools have been completed**

Overall Result (circle one)

Competent / Not Competent

Assessor’s Name:

Signature: Date:

**Do not sign this section until after the assessment has been marked and you are satisfied with the result.**

Student’s Name:

Signature: Date:

**Case Study**

# Neville Iman – Grocery Store Worker

Neville Iman (DOB 15/5/1973) is a 46-year-old grocery store person working for Lakeside Fruit and Vegetable Suppliers, 310 Ipswich Rd, Annerley QLD 4103 P: (07) 3891 2292 for the past 2 years. He lives at 5/90 Ipswich Rd, Buranda QLD 4102. His contact details are [nev73@gmail.com](mailto:nev73@gmail.com) and mobile 0400 222 333. Lakeside has 25 workers with a small warehouse and sorting area. Neville immigrated to Australia from Somalia 4 years ago. He has held previous jobs including labourer and small shop owner in Somalia. Since he has been in Australia he has held positions as Night Fill at a local supermarket and casual cleaner at a shopping centre. He has a forktruck licence, manual handling, safe handling of food, first aid and cpr certificates and an open manual car licence. He speaks English as a second language and is able to read and write English at approximately a grade 3 level but has difficulties with spelling and grammar.

* There is a loading dock at the end of the building for drop off of raw product for receivables and unpacking and collection of empty pallets. There is an administration office with four staff and the site manager.
* The duties undertaken by workers include clerical/administration activities (office staff), fruit sorting/grading and packing, stores work and delivery driving.
* Neville’s position involves a small amount of forklift driving (5-10%). Neville is a full-time worker whose usual hours are Monday to Friday 4:30am to 1pm. He usually does 3 hours overtime on Saturdays in the sorting/grading area. Neville has worked for Lakeside for 2 years and is familiar with the staff in all areas.
* On Thursday 14 March 2019, half an hour before the end of his shift Neville Iman sustains a moderate cut to his left (non-dominant) hand. He was carrying a box of fruit by holding the plastic packing strapping when the strap broke and the box fell to the ground dragging the strapping across his palm.
* Neville goes to the local hospital and receives five stitches to his left palm. He is told that he has not damaged any tendons or nerves. He is given a certificate for 4 days total incapacity (14-17 March 2019) and then 2 weeks fit for suitable duties (18-29/3/2019) by the doctor at the hospital when he tells the doctor he is a forklift driver who uses his left hand to operate the controls on the fork lift (with the right hand on the wheel).
* You are the rehabilitation and return to work coordinator for Lakeside Fruit and Vegetable Suppliers however you were away from the site at the time of the injury. Neville was taken to the hospital by his Supervisor, Jimmy Dean. When you arrive back at 3pm Jimmy tells you what has happened.
* You contact Neville to find out how he is and what the doctor has recommended. He informs you he would like to lodge a claim for workers’ compensation and will bring in his workers’ compensation medical certificate the following day.
* Neville arrives the workplace at 10 am the following morning. His hand is lightly bandaged and you notice that he appears to have driven into the car park with only one hand on the steering wheel.
* When you ask Neville how he is feeling he responds that he’s “pretty good considering”. When you ask about his driving he says he is able to use his injured hand on the bottom of the wheel and was told by the doctor at the hospital that he is alright to drive as his car is an automatic and he doesn’t really need to use his left to drive that car. You tell him that you are happy to arrange some suitable duties for him and ask him if he would be able to follow-up with his own doctor that day so that you can get a clear indication of what he can and can’t do work-wise.
* Neville calls his doctor’s surgery and makes an appointment for 1pm with his GP Dr Rivers. You remind Neville to take the letter explaining Lakeside’s workplace rehabilitation program and the copy of the (now signed) Injured Worker Authorisation with him.
* Neville attends his appointment with Dr Rivers, who calls you whilst Neville is present. The doctor doesn’t want Neville to be operating the forklift or lifting with his injured hand initially, however he is of the opinion that Neville should be able to do light work with the injured hand. He thinks that Neville should move gradually from very light duties to duties requiring use of the hand for heavier tasks and should attempt “a bit of time” on the forklift before he starts back on his usual hours. You confirm that you can organise a program that meets these requirements and the doctor indicates that Neville will be able to start back at work on Monday 18th March 2019 providing there is a program in place. The doctor says that Neville will be certified for two weeks partial incapacity, but should be able to return to full duties, including usual hours driving the forklift after this. He also indicated that Neville will need to see a hand therapist for wound care / hand therapy twice a week for the two weeks.
* After your conversation with Dr Rivers you consult with Jimmy Dean, Neville’s supervisor, and indicate that Neville will be required to perform suitable duties for two weeks with some forklift driving allowed during week two. You approach Jenny Lee, the supervisor in administration and Jimmy Dean, the Sorting/Grading supervisor and ask for duties that may be suitable for Neville over the next two weeks. The following list represents the duties that can be made available to him in these two areas.

## **Administration**

|  |  |  |
| --- | --- | --- |
| **Activity** | **Tasks** | **Time available** |
| Filing invoices | Seated at table identifying the invoice source and the year received and placing in a file. Then putting file in cabinet. | 2 hours per day  (Any time) |
| Completing monthly equipment audit | Walking around warehouse completing a checklist relating to each piece of equipment. | 1 day  (By end of month) |
| Entering 2 years of monthly equipment audit information in new database | Seated at computer workstation and entering information into tables. (Information corresponds to content of audit sheets) | 2 days  (Anytime) |
| Answering phones and taking messages | Seated at desk using three line telephone system and writing messages | 1 hour per day  (12pm –1pm) |
| Preparing Marketing Packs | Collating three page brochures and stapling and placing into envelopes and sticking a printed address label on the envelope. | (By end of month) |

## **Sorting, grading and merchandising**

|  |  |  |
| --- | --- | --- |
| **Activity** | **Tasks** | **Availability** |
| Sorting product | Opening cartons and picking pieces of unsuitable (e.g. bruised) fruit and placing in a bin. | 4am – 2pm  (any time during this period, can work at own pace) |
| Random checks | Selecting random pieces of fruit from packing boxes and completing a checklist regarding the quality. | 4am – 2pm  (any time during this period, must perform for minimum of one hour) |
| Removing stacked packed boxes from pallet | Removing shrink wrapping and lifting full boxes of fruit from pallet onto trolley. | 4am – 2pm  (any time during this period, must perform for minimum of one hour) |
| Taking boxes out onto shop floor | Pushing cartons of fruit and vegetables on trolley onto shop floor. | 4am – 2pm  (any time during this period, must perform for minimum of one hour) |
| Placing boxes(and individual items) of fruit and vegetables onto shelves | Placing boxes from trolley onto display stands, placing and organising fruit and vegetables, picking | 4am – 2pm  (at 7 minute intervals) |

* Neville calls in to see you after his doctor’s visit. His 4 year old son is with him. You discuss his suitable duties options including some of the clerical tasks. He says that he is happy to do this but is concerned that he will need some help in the office and that the office staff don’t start until 8:00am. His concern is based on his availability to pick up his son from pre-school at 2pm (which he does every day). He states that he can’t start later than usual and still work the number of hours he normally does. You negotiate him starting the day in the grading and sorting area as these tasks are available for a 4:30am start and he indicates that he can then move into the office later in the morning. You advise Neville that Jenny Lee, administration supervisor has agreed to provide training in administrative duties.
* Neville agrees to the suggested duties, but is happy to let you arrange the order and times spent performing them. You ask him to pick up a copy of the program from Jimmy Dean on Monday morning when he arrives at 4:30am and tell him that you will catch up with him at 7am to see how he is going and to make sure he is happy to sign off on the completed program.
* Keeping in mind Neville’s level of literacy, you create the suitable duties program and gain approval from Neville’s supervisor and the supervisors in the two areas that will be accommodating Neville during his suitable duties program.
* You fax Neville’s suitable duties program to Dr River’s practice for his records. You provide copies of Neville’s Suitable Duties Program to all supervisors and ask them to sign the original. You then case note all of these activities.

**Job Task Analysis**

**Grocery store worker – general**

Back of house grocery store worker, responsible for stock handling at the rear of store, and merchandising (stocking of shelves in store).

**Tasks and tools used**

* Stock handling: Size of store determined the number of deliveries of stock per week. Multiple pallets of goods are delivered by truck and shifted by forklift to rear of stock and the shelves in the store room/cool room.
* Pallets are then handled by pallet jack to break down loads to relevant aisles where stock is manually moved out onto the shop floor with a trolley and placed on the shelves.

**Critical physical job demands and other task requirements**

| **Critical job demand descriptor** | **% of time the task is performed** | **Task** |
| --- | --- | --- |
| Constant | >66% | Reaching in front of body to stock shelves, gross handling of various shaped items with fingers/hands. |
| Frequent | 34%–66% | Static standing, stooping and bending to handle low stock, walking, reaching to head height, lifting 1-16kgs |
| Occasional | 5%–33% | Twisting trunk, squatting, pushing, pulling, head down and head rotated tasks, lifting up to 16kg boxes from floor to shoulder height, carrying 5-10m, pushing / pulling pallet jack up to 30m. |
| Rare | <5% | Kneeling. |

**Suitable duties**

* goals must be clear, realistic and achievable
* must have ‘buy-in’ from the worker
* worker helps to set the goals, and must be answerable if goals are not met (this allows barriers to return to work to be identified at an early stage and obstacles overcome)
* workers need to understand they have an obligation to participate in rehabilitation and return to work as per Section 232 of the *Workers’ Compensation and Rehabilitation Act 2003* (the Act).

**Return to work suggestions**

Worker can begin with light duties and include more tasks as their capacity for work changes. We’ll work with all parties, including the treating medical provider, employer and worker to ensure everyone is aware of where the worker is with their rehabilitation and stay at, or return to work.

Note: some tasks are dependent on worker’s injury and capacity, and some tasks may require the assistance of a co-worker.

**Offsite**

Return to work can begin at home for those having difficulty with transport, medication or the injury prevents them from returning to work.   
  
If the worker needs to take a break from work, their rehabilitation can still begin at home. Tasks can include:

* video on safety issues can be viewed (lying in bed if injury type requires)
* computer-based programs, CDs or DVD on work-related subjects
* phone-based work
* emails
* training
* other worksite inductions
* checking or auditing paperwork, e.g. helping the WHSO audit lost time injuries (LTI’s) for a six month period.

**Host employment**

In the event an employer is unable to provide suitable duties, a host placement may be required. If this is the case, the worker may be placed at a different employer in a graduated return to work plan until they’re able to ‘upgrade’ back to his/her pre-injury role with their pre-injury employer.

WorkCover's [Recover at work program](https://www.worksafe.qld.gov.au/recoveratwork) places injured workers in short term host employment with employers who have an established track record of successful return to work outcomes with their own workers.

**More return to work resources**

Return to Work Checklist for Grocery Store Worker

* assist with planning, implementation of a rehabilitation or return-to-work program including:
* job redesign, reduced hours and alternative duties as appropriate (review job task analysis and develop SDP)
* documenting existing skills, experience and capabilities of affected worker (create job task analysis) - documenting information about Fred
* assisting with design of a rehabilitation or return-to-work program and determining retraining requirements (SDP + retraining)
* consulting with relevant mangers about the program (email note to manager / supervisor)



**Grocery Retail Worker : Return to Work Checklist and Plan**

# Please complete with your patient

Worker name: Claim number: \_ Injury:

Worker will be able to participate in the duties as below from: / / to / /

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Full time | □ | Part time | □ |  | hours per day |  | days/week |

N.B. Based on your information, a suitable duties plan will be established at the worker's place of employment. In the absence of task availability at their usual workplace the worker will continue to be paid weekly compensation and Work Cover will source suitable alternative workplace rehabilitation with a host employer.

Please consider the “health benefits of good work” and focus on what your patient can do.

|  |  |  |
| --- | --- | --- |
| **Tick if suitable** | **Job Tasks** | **Limitations/Comments** |
|  | Stock handling - Rear of store. Store size and location determines the number of deliveries of stock per week. For grocery there may be multiple pallets of goods delivered by truck and shifted by forklift to the rear of store to the shelves in the store. Staff then handle pallets by pallet jack to break down loads to relevant aisles. Goods are then transferred from the storerooms at rear to the shop floor via pallet jack or flat top trolley or shopping trolley. |  |
|  | Merchandising - Items are broken down from cartons and placed on the shelves. The team member walks and visually inspects the store floor ensuring merchandise is correctly and appropriately displayed. |  |
|  | Customer service - The sales team member will roam through the different areas of the store assisting customers. This may involve low level to overhead reaching and handling of stock as well as register use. |  |
|  | Point of sale – register/eftpos - Items are scanned at point of sale, and payment collected from customer. Usually done at waist height or above. Security tags/pins are removed from items which are purchased, and items are bagged for customer. |  |
|  | Opening and closing of shop doors - This task consists of opening/closing the access of the store involving pulling/pushing a concertina door, sliding glass door or a standard glass door. |  |
|  | Housekeeping - This task may consist of dusting, vacuuming, mopping, cleaning of mirrors and disposing of rubbish. Mirrors are cleaned, but only what is able to be reached. Rubbish is carried or pushed on a trolley to a waste disposal bin. |  |

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| **Worker name:** |  |
| **Claim number** |  |
| **Injury:** |  |

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| **Tick if suitable** | **Alternate duties** | **Limitations/Comments** |
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If none of the above tasks or alternate duties are appropriate at this time, please advise a review date or timeframe to some form of return to work \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ / \_\_\_\_ / \_\_\_\_/ \_\_\_\_

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| --- | --- |
| □ | Please tick here if you have been unable to identify any tasks and you would prefer an allied health provider to help implement a return to work plan. |

**Other comments:**

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**SIGNATURES**

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| --- | --- | --- |
| **Treating Medical Practitioner:** |  | / / |
| **Worker:** |  | / / |
| **Employer:** |  | / / |

# Submission and payment for this form (WorkCover Queensland claims only)

If this form is requested as part of a workers' compensation claim, please forward this completed form via our online services, or alternatively by faxing to 1300 651 387. You can charge for a "completed form" under the relevant table of costs, found on our website [worksafe.qld.gov.au.](http://www.worksafe.qld.gov.au/) This form will become part of a claim file and may therefore be read by claims staff, Work Cover Queensland’s network of advisory doctors, specialists at the Medical Assessment Tribunal or during legal proceedings.

In addition, the form that you provide may be released to another person (usually the worker or employer) under the Right to Information Act (2009), the workers’ compensation legislation or as authorised or required by law.