



# REHABILITATION & RETURN TO WORK CO-ORDINATOR | RRTWC

## PRE-COURSE ACTIVITIES

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<b>Student's Name:</b>	
<b>Date of Course:</b>	
<b>Student's Signature:</b>	

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**Instructions to the candidate:**

The Rehabilitation and Return to Work Co-ordinator Course requires that a range of evidence be collected in order to determine your competency. This evidence collection includes a pre-course written assessment, in-course theory and practical assessment and possible post-course work activities if not completed during class.

If you have any questions, please ask your trainer at the course, email [rtrwc@ohsa.com.au](mailto:rtrwc@ohsa.com.au), or call 1300 647 200.

This document may be brought to the course or emailed to [rtrwc@ohsa.com.au](mailto:rtrwc@ohsa.com.au).

**Question 1.** Each state and territory in Australia has its own workers' compensation scheme. What are two other Australian workers' compensation schemes that are **not state-based**?

1.
2.

**Question 2.** Who are the workers' compensation insurers in Queensland?

1.
2.

**Question 3.** What title and year of the Queensland Act sets out arrangements for workers' compensation in Queensland?

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**Question 4.** Go to the WorkCover website at <https://www.worksafe.qld.gov.au/claims-and-insurance/compensation-claims/medical-assessment-tribunals> for the next three questions.

**Question 4a.** Explain briefly in your own words what the purpose of a Medical Assessment Tribunal is.

<b>Overview of MAT:</b>

**Question 4b.** Who can refer a worker to a Medical Assessment Tribunal?


**Question 4c.** Provide two reasons/examples why workers may need to attend the tribunal.

1.
2.

**Question 5.** What are the three objectives of the Queensland Worker's Compensation Scheme? One has been provided as an example; list another three. (These can be found in the pre-course information guide).

<i>e.g. 1. Injured workers or dependents are treated fairly by insurers.</i>
2.
3.
4.

**Question 6.** Go to the Workcover Website at <https://www.worksafe.qld.gov.au/laws-and-compliance/workers-compensation-laws/workcover-queensland-gazette-notice> and download the **CURRENT WorkCover Queensland industry classifications**.

List which WIC code you think your employer's predominant business activity is and the Workcover premium rate for that WIC code per \$100/wages. List also the industry with the highest premium rate in \$per/\$100 wages.

(You will need to open the link and scroll down many pages to find the WIC table)

WIC Code	Industry Type	\$ /\$100 wages
Eg. 012104	e.g Mushroom growing	\$2.8 \$per/\$100 wages (ie. For every \$100 of wages, organisations in this industry pay the insurer on average \$2.80)
Your WIC Code:		\$ \$per/\$100 wages
Highest WIC Code (in terms of dollar value):		\$ \$per/\$100 wages

**Question 7.** What was the penalty and restitution order for this case? This is also included in the pre-course learner guide and highlighted under prosecutions 19/12/2016 Brisbane.

<https://www.worksafe.qld.gov.au/laws-and-compliance/compliance-and-enforcement/prosecutions/workers-compensation-prosecutions/workers-compensation-prosecution-outcomes/19-12-2016-brisbane>

<b>Penalty: (Summary of penalty)</b>
<b>Restitution: \$</b>

**Question 8.** What is the definition of suitable duties (briefly in your own words)?


**Question 9.** How should the worker's medical information obtained during rehabilitation be treated?


**Question 10.** What should the RRTWC or employer get from the worker before obtaining or releasing information about the worker?


**Question 11.** Discuss briefly, in your own words, the dispute resolution processes at your workplace (briefly in your own words).


**Question 12.** Explain briefly, in your own words, the formal review and appeals processes within Queensland's workers' compensation scheme. I.e. As per Parts 2 and 3 of the Act. (briefly in your own words).


**PRE-COURSE THEORY QUESTIONS – SIGN OFF**

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


Assessment Results (mark one)

☐ Satisfactory / Not Satisfactory ☐

**Assessor's Comments about the assessment**

(include any details of reasonable adjustment or other consideration)


**Assessors Signature** \_\_\_\_\_