

 <p><b>BAY OF PLENTY DISTRICT HEALTH BOARD HAUORA A TOI</b></p>	<p><b>HEALTH AND SAFETY - ACCIDENT CLAIMS AND RETURN TO WORK</b></p>	<p><b>Policy 5.3.1 Protocol 6</b></p>
<p><b>HEALTH &amp; SAFETY PROTOCOL</b></p>		

**STANDARD**

- There shall be an active procedure in place for ensuring that timely and appropriate rehabilitation is provided in an open, consultative manner, and in line with documents accepted for ACC accredited employers.
- All employees injured as a result of a work or non work related accident are supported and provided rehabilitation so as they can return to normal work duties as soon as is possible.
- All work and non work related injury claims, rehabilitation and return to work processes are managed in accordance with the contract between Bay of Plenty District Health Board (BOPDHB) and the Third Party Provider external injury / illness management company, legislation and the administrative procedures detailed in this policy.

**PURPOSE**

- To ensure that BOPDHB employees are treated fairly and kept informed of all decisions made in respect to a claim, rehabilitation and their return to work.
- To ensure claims and rehabilitation needs of employees are identified and provided by an external injury / illness management company (Third Party Provider) in conjunction with the BOPDHB employee.
- To manage the process in relation to injuries of a claimant. The Third Party Provider has the obligation of ensuring that the claimant is rehabilitated in a timely and appropriate manner.
- To ensure that all employees requiring rehabilitation are provided with an effective programme so they can return to work following injury / illness as soon as possible.
- The following principles underlie the BOPDHB’s commitment to rehabilitation:
  - The sooner a person gets back to work after an injury the better the chance of recovery and the less the likelihood that the injury will become long term.
  - Quick action after an injury is a proven strategy for successful and durable return to work.
- To manage direct and indirect costs to the organisation.

**STANDARDS TO BE MET**

**1. Rights And Responsibilities**

**1.1 The Injured Employee’s Rights**

- a) To choose their treating medical practitioner.
- b) To have access to appropriate externally funded financial and social compensation following injury and during rehabilitation.
- c) To be meaningfully involved in all decisions and actions relating to their injury management.
- d) Have all personal information kept confidential by the parties authorised to have the information.
- e) Have access to all relevant information.
- f) Have a copy of their Individual Rehabilitation Plan (IRP).
- g) Have the IRP changed where it is proving ineffectual or unsatisfactory.

<p>Issue Date: Apr 2017 Review Date: Apr 2018</p>	<p>Page 1 of 5 Version No: 13</p>	<p>NOTE: The electronic version of this document is the most current. Any printed copy cannot be assumed to be the current version.</p>
<p>Protocol Steward: Health &amp; Safety Manager</p>	<p>Authorised by: GM Corporate Services</p>	

**1.2 The Injured Employee's Responsibilities**

- a) The injured employee is responsible for ensuring that they seek the appropriate medical treatment when injured.
- b) The injured employee is also required to complete an online Incident Management form, then print the form, sign and forward it to a Specialty Nurse, Health & Safety (H&S). Follow process as outlined in policy 2.1.4 protocol 2 Incident Management – Decision Making Process.
- c) Is required to complete an ACC46 or ARC18 form at their treatment provider.
- d) A copy of the ACC46 or ARC18 form is to be forwarded promptly to Third Party Provider by the treatment provider. **NOTE:** A claim will only be accepted if both forms have been completed.
- e) Obtain a Medical Certificate, where required.
- f) To participate in a rehabilitation programme if required / appropriate according to ACC Act 1999 and to take overall responsibility for their own rehabilitation. Where an injured employee fails to co-operate in the rehabilitation process the Accident Insurance Act provides for action to be taken in the form of suspension or cancellation of entitlements – section 116.

**1.3 Rights of BOPDHB**

BOPDHB is to:

- a) Determine a claim for compensation in accordance with the Accident Insurance Act 1998.
- b) Be kept informed of the medical status and progress of amendments to the IRP.

**1.4 Responsibilities of BOPDHB**

BOPDHB is responsible for:

- a) Paying injured employees appropriate weekly payments, allowances, benefits and other costs as defined in the Accident Insurance Act 1998.
- b) Paying relevant treatment and rehabilitation expenses.
- c) Ensuring there is an adequate rehabilitation in place for injured employees.
- d) Participating in the rehabilitation process for injured employees.
- e) Where an injured employee cannot return to their pre-injury position, providing wherever possible, appropriate work at the same or equivalent level.
- f) Providing an "Employee Information Pack" to all employees new to the ACC Partnership Programme.
- g) Through health and safety communications and new employee orientation programmes, ensuring staff are made aware of the information contained within the "Employee Information Pack" and how to obtain a further copy.
- h) In situations where an employee is not co-operating in the rehabilitation process, prior to suspending or cancelling an individual's entitlements, every reasonable effort will be made by the case manager and BOPDHB to engage the employee in the rehabilitation process.

**1.5 Employee's Line Manager's Responsibilities**

- a) Needs to ensure that the injured employee has completed the BOPDHB Incident Management Form and forwarded this to the Specialty Nurse, Health & Safety.
- b) Needs to check that the ACC46 or ARC18 form has been forwarded to Third Party Provider or advise the employee to do so.
- c) Actively participate in the rehabilitation and return to work planning process.

Issue Date: Apr 2017	Page 2 of 5	NOTE: The electronic version of this document is the most current. Any printed copy cannot be assumed to be the current version.
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1.6 Specialty Nurse, Health and Safety

- a) Check that a Incident Management form and the ACC46 or ARC18 form are completed within two (2) days.
- b) Ensure that the accident is recorded in the Accident Register within seven (7) days of the accident.
- c) Liaise with Third Party Provider on the management of the claim.
- d) Have delegated authority within the BOPDHB to accept an injury / illness as work related or not.
- e) Health and Safety provides support, information and case management to the injured employee.
- f) Follow Third Party Provider Rehabilitation and Claim process requirements as defined in the TPP Manual.

1.7 Health and Safety Manager

- a) Be the designated “single point of contact” responsible for ACC notification and liaison for fatal claims, serious injury claims or claims of a sensitive or complex nature.
- b) Be the contact person for disputes involving decisions on claims.

1.8 Union and H&S Representatives

Union and H&S Representatives are to be consulted in the preparation of rehabilitation plans if the injured staff member requests this.

1.9 Controlled Document Review and Implementation

This controlled document is to be reviewed and implemented in consultation with Union and H&S Representatives.

**2. General**

2.1 Determining The Need For Rehabilitation

Rehabilitation is generally required when:

- a) There is a medical certificate for five (5) days off work with no clear prognosis.
- b) The employee has been off work as a result of an injury for seven (7) days.
- c) The employee is not able to return to pre-injury duties, even temporarily.
- d) The employee is not recovering.
- e) Medical opinion indicates that work tasks or equipment need to be altered.
- f) It is apparent that the employee may never be able to return to current duties due to the severity of the injury.

2.2 Case Manager

- a) In all circumstances where a rehabilitation programme is required a case manager will be allocated to work with the injured employee.
- b) The case manager will ensure that an Individual Rehabilitation Plan (IRP) is established for each employee who has an injury that involves seven (7) or more days of total incapacity for work.
- c) The case manager will liaise with any parties involved in the treatment or occupational rehabilitation of an injured employee or involved with the workplace to assist an injured employee to remain at or return to suitable work.
- d) The case manager will monitor the progress of the injured employee.
- e) The case manager will take steps to, as far as is practicable, prevent recurrence or aggravation of the relevant injury upon the employees return to work.

<p>Issue Date: Apr 2017 Review Date: Apr 2018</p>	<p>Page 3 of 5 Version No: 13</p>	<p>NOTE: The electronic version of this document is the most current. Any printed copy cannot be assumed to be the current version.</p>
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- f) The case manager will assist in meeting legislative requirements for occupational rehabilitation, return to work flows and the health and safety programme.

### 2.3 Developing An IRP

- a) The case manager will work with the injured employee and any other relevant BOPDHB staff to establish an IRP.
- b) The IRP should be developed within one (1) week of injury notification and no later than 13 weeks, as required by legislation.
- c) The injured employee must understand and agree with the IRP.
- d) Steps in the IRP development and review process:
  - i. Gathering of information.
  - ii. Setting the return to work goals.
  - iii. Identifying suitable duties.
  - iv. Hold meetings with the injured employee and the relevant line manager to gain commitment to and agreement for the IRP.
  - v. Check with treating doctor prior to implementation to ensure the work duties are appropriate.
  - vi. Implementation of the IRP.
  - vii. Progress is monitored and IRP reviewed.
  - viii. All goals of IRP met.
- e) The IRP will contain objective; goals; strategies or actions; target dates for completion; review dates and evaluation points; closure; and will be signed by the injured employee and the case manager.
- f) If an employee has a signed off IRP that includes a return to work plan their salary / wages will be topped up to full pay.

### 2.4 Options For Consideration In The Individual Rehabilitation Planning Process

Three (3) options are generally available for consideration depending on the individual employees circumstances. They are:

- Rehabilitation and return to the employees existing position
  - Work Trial Plan
  - Retraining Plan
- a) Rehabilitation  
A plan to return the person back to their normal work / duties.
  - b) Work Trial Plan
    - i. Work trials are a programme of work-related tasks undertaken which will build an injured employees physical, emotional and mental capacity, tolerance, endurance and work performance.
    - ii. Each work trial plan must be developed and reviewed having regard to the individual needs of the employee, should be function orientated and have an expected outcome of work placement.
    - iii. All possible options should be exhausted prior to a work trial plan being approved.
  - c) Retraining Plan
    - i. Where it can be demonstrated that an injured employee is unable to return to their existing position a period of retraining may be required to enable the person to return to an equivalent type of position.
    - ii. A retraining plan may be developed in consultation with the BOPDHB and the injured employee where it can be demonstrated that:

Issue Date: Apr 2017	Page 4 of 5	NOTE: The electronic version of this document is the most current. Any printed copy cannot be assumed to be the current version.
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- The employee will suffer physical, emotional or financial hardship without retraining.
- The deficit in skills will prevent a return to work.
- The deficit in skills will delay a return to work to the extent that there will be a long term cost should retraining not be provided.
- Retraining will successfully make up the deficit in skills.
- On completion of retraining work is likely to be available.
- The injured employee has the physical and / or mental capabilities to undertake retraining.
- The injured employee has the pre-requisite education, training or skills for the demand of retraining.
- The employee is suitably motivated.

**ASSOCIATED DOCUMENTS**

- Bay of Plenty District Health Board Health and Safety controlled documents
- Bay of Plenty District Health Board Glossary of Terms / Definitions List
- Worksafe New Zealand Serious Harm Notification

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