



Catholic Church
Endowment Society
(CCES)
ROADSHOW
2022

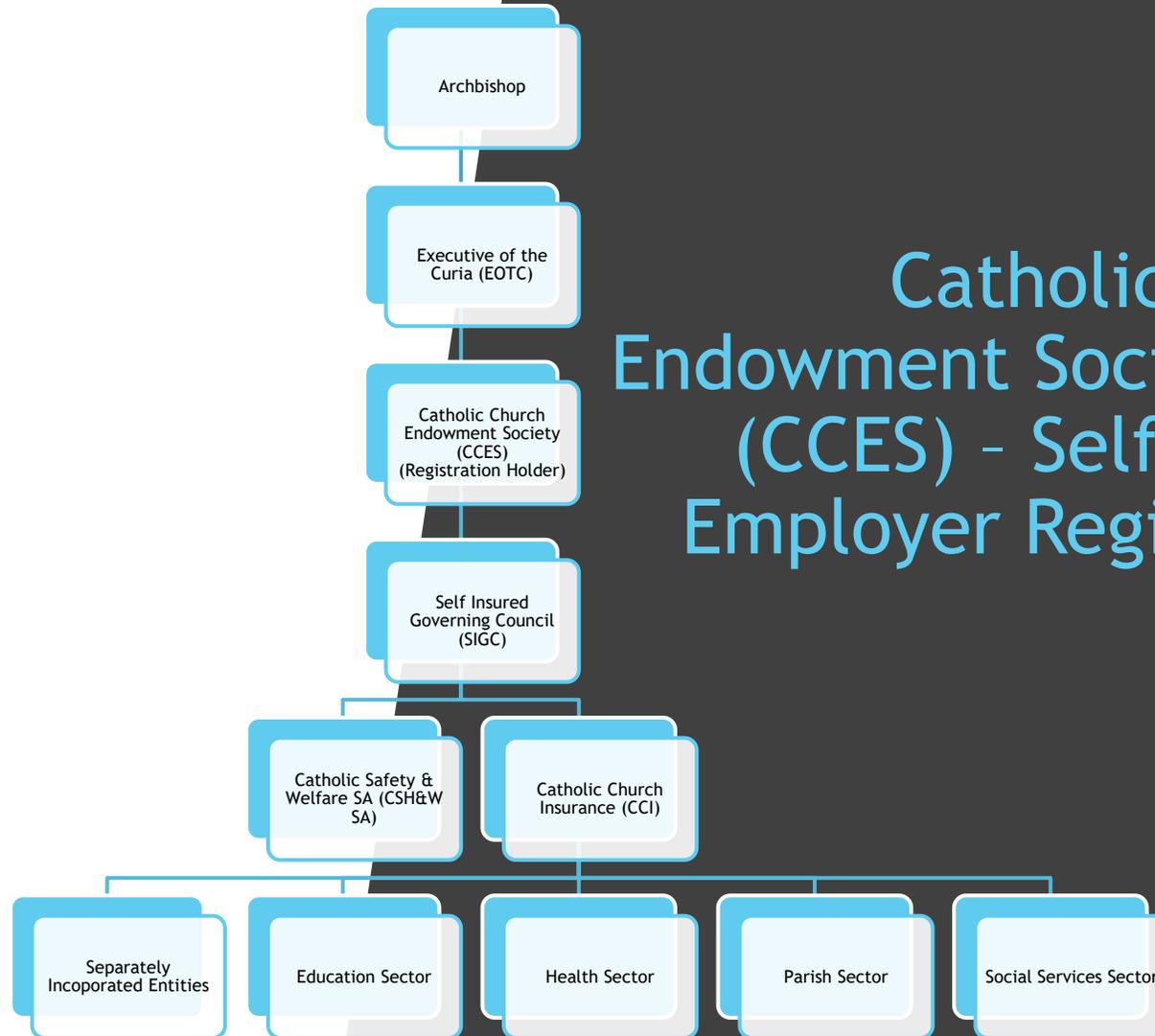


Agenda

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SELF INSURANCE

Catholic Church Endowment Society Inc. (CCES) - Self Insured Employer Registration



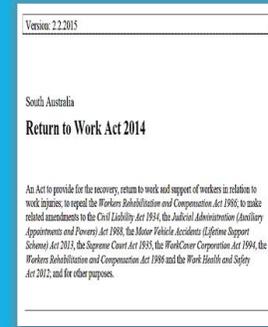
Self-Insurance - Key Points

- ▶ CCES is considered a single organisation for the purposes of self-insurance.
- ▶ Self-Insurance provides several benefits such as self-management of claims and rehabilitation activity for injured workers and cost savings.
- ▶ Regular review of CCES by RTWSA occurs.
- ▶ All locations within CCES are expected to be conforming to Work Injury Prevention (WHS) and Injury Management (Claims & Rehabilitation) requirements at all times.
- ▶ 1 worksite not conforming could impact the overall outcome for CCES when RTWSA undertakes evaluation activity.
- ▶ Active and positive support of injured workers at the worksite level is crucial.
- ▶ CSHWSA and CCI are there to support and assist worksites in meeting and sustaining conformance to the defined requirements.

Self-insurance Key Aspects

- ReturntoWorkSA (RTWSA) regulates self-insurance in SA
- Prudential (employee numbers, financial, insurances etc.)
- Work Health & Safety Management (WHS)
- Work Injury Management (claims and rehabilitation)
- Financial and operational benefits being self-insured
- CCES expected to be always conforming to requirements
- CCES holds the self-insurance registration and considered to be a single employer for the purposes of self-insurance
- CCES Self-Insured Governing Council (SIGC), Catholic Safety Health & Welfare SA (CSHWSA), Catholic Church Insurance (CCI) and all the individual employers that make up CCES, have key responsibilities in managing and maintaining the self-insurance registration

Self-Insurance Governance - RTWSA



Self-insurance is governed by the following primary defined requirements:

- Return to Work Act 2014
- Code of Conduct for self-insured employers
- WHS Standards for self-insured employers
- IM standards for self-insured employers

CCES & Self-Insurance - Responsibilities

- Comply with the RTW Act and Code at all times
- Demonstrate appropriate design and effective application of WHS and Work Injury systems
- Provide all relevant information when requested or required by RTWSA
- Provide appropriate facilities for ongoing interactions e.g. evaluations, mid-term reviews etc.

RTWSA WHS Performance Standards

RTWSA will require the following as a minimum from the following standards that Centacare has:

- **Standard 1 - Commitment & Policy**
 - Emergency & contingency plans for all sites
- **Standard 2 - Planning**
 - Training needs identified & training plans in place
- **Standard 3 - Implementation**
 - All auditable outcomes from CCES Procedures in place for all sites
- **Standard 4 - Measurement & Evaluation**
 - Corrective actions from audits and investigations are actioned within defined timeframes
- **Standard 5 - Management Systems Review & Improvement**
 - That the executive review & document their management systems.

Note: Self-insured Governing Council (SIGC), Catholic Safety Health & Welfare SA (CSHWSA) and CCES Employers' have joint responsibilities for these requirements.

RTWSA Injury Management (workers compensation) Performance Standards

RTWSA will require the following as a minimum from the following standards that Centacare has:

- **Standard 1 - Policies and Procedures**
 - RTW Coordinators in place and trained (where relevant), position descriptions (where relevant), info in place on how to report an injury, lodging a claim, complaints and disputes
- **Standard 2 - Claims Management**
 - Provision of suitable employment
- **Standard 3 - Dispute Resolution**
 - Assisting in the dispute resolution (where relevant)
- **Standard 4 - Measurement, Monitoring & Review**
 - Providing feedback on the injury management process (where relevant)

Note: Self-Insured Governing Council (SIGC) & Catholic Church Insurances (CCI) have primary responsibility for majority of these requirements

Summary

- Self-insurance evaluation is a significant exercise
- Sites will play a very important role and active participation will be crucial
- Sites need to ensure all WHS aspects are being addressed and are current
- Sites need to ensure that RTW Coordinators are in place (where required) and have been trained, information relating to how to report an injury, lodge a claim and complaints/dispute process is readily available and known by workers

NOTIFIABLE INCIDENTS

What are Notifiable Incidents?

The WHS law requires:

- ▶ a 'notifiable incident' to be reported to the regulator immediately after becoming aware it has happened
- ▶ if the regulator asks—written notification within 48 hours of the request, and
- ▶ the incident site to be preserved until an inspector arrives or directs otherwise (subject to some exceptions).

Failing to report a 'notifiable incident' is an offence and penalties apply.

- ▶ What is a 'notifiable incident'

A 'notifiable incident' is:

- ▶ the death of a person
- ▶ a 'serious injury or illnesses, or
- ▶ a 'dangerous incident'

arising out of the conduct of a business or undertaking at a workplace.

- ▶ 'Notifiable incidents may relate to any person—whether an employee, contractor or member of the public.
- ▶ Serious injury or illness
- ▶ Only the most serious health or safety incidents are notifiable, and only if they are work-related. They trigger requirements to preserve the incident site pending further direction from the regulator.

Serious Injury or Illness

Only the most serious health or safety incidents are notifiable, and only if they are work-related. They trigger requirements to preserve the incident site pending further direction from the regulator.

- Immediate treatment as an in-patient in a hospital
- Immediate treatment for the amputation of any part of the body
- Immediate treatment for a serious head injury
- Immediate treatment for a serious eye injury
- Immediate treatment for a serious burn
- Immediate treatment for the separation of skin from an underlying tissue
- Immediate treatment for a spinal injury
- Immediate treatment for the loss of a bodily function
- Immediate treatment for serious lacerations
- Medical treatment within 48 hours of exposure to a substance
- Prescribed serious illnesses (e.g., Q fever, Avian Influenza, contact with human blood causing infection)

Dangerous Occurrence including 'near misses'

Some types of work-related dangerous incidents must be notified even if no-one is injured. The regulator must be notified of any incident in relation to a workplace that exposed any person to a serious risk resulting from an immediate or imminent exposure to:

- An uncontrolled escape, spillage or leakage of a substance
- An uncontrolled implosion, explosion or fire
- An uncontrolled escape of gas or steam
- Electric shock
- The fall or release from a height of any plant substance or thing
- The collapse or partial collapse of a structure.

What to do

Sites to notify their WHS Consultant immediately they believe they have a notifiable incident (if in doubt ring)

Scene to remain **UNDISTURBED** until SafeWorkSA advise it is alright to undertake repairs, clean up etc.

Worksite must commence investigation immediately (take photos, obtain relevant paperwork etc.)

Worksite to log incident on incident database.

Catholic Safety Health and Welfare will notify SafeWorkSA on your behalf.

EARLY INTERVENTION

Early Intervention - Program (no claim)

The Early Intervention Program is a way of supporting an injured Worker who sustains a Minor injury in the workplace without the need to lodge a formal Workplace Injury Claim. **Note:** it is the Worker's right at any time to lodge a formal Claim for Workers Compensation and should be encouraged to do so if the injury is not Minor in nature i.e., injuries that don't require major modifications or restrictions to work duties or any time off work.

An Incident Form must be completed and provided to CSH&W SA for all workplace injuries including those involving the Early Intervention Program.

Under the Early Intervention Program, the site will normally pay for a small number of doctors' visits, medication and physiotherapy, without the requirement for the injured Worker to lodge a formal Workplace Injury Claim. The general guideline is for a number of visits is up to four (4) GP consults and up to six (6) physiotherapist sessions. **Note:** The Early Intervention Program do not relate costs associated with meeting WHS requirements for Workers, these should occur regardless and include items such as providing an ergonomic modifications to the office environment (e.g., chairs or desks) where a Worker has raised concerns regarding soreness.

Early Intervention - Program (no claim)

1. A Worker reports a Minor workplace injury to the Employer. **Note:** If the Worker requires time off and / or major changes to their work tasks, then the Early Intervention Program cannot be used, and a Workplace Injury Claim form must be submitted to our Insurer Catholic Church Insurance Limited.
2. The Employer manager/supervisor offers Early Intervention Program support to the injured Worker and obtains a signed 'Early Intervention Program Acknowledgement Form (003F)' (see attached). A copy of this Form must be attached to the worker's personnel files and a copy provided to [CSHWSA Team](#) for record keeping.
3. Worker provides GP / Physiotherapy / Medication receipts to manager / supervisor for re-imburement and Employer reimburses the Worker directly.
4. Manager / supervisor keeps record of costs and at the end of the treatment, supplies cost details to Catholic Safety Health & Welfare Unit via email [CSHWSA Team](#) detailing using the 'Early Intervention Program Employer Reporting Template (072F)
5. If the Worker subsequently lodges a Workplace Injury Claim then the costs paid under the Early Intervention Program will be considered for reimbursement to the employer if the claim is accepted by Catholic Church Insurance Limited.

Early Intervention - Claim

Early Intervention

Early intervention is action taken by employers to minimise the impact and duration of an injury.

Key factors include early reporting of injuries, employee centred injury support and the removal of barriers to return to work.

Early intervention is critical to helping your injured workers recover at and/or return to work and has been shown to:

1. significantly reduce the impact and duration of emerging symptoms of ill health, injury or illness;
2. prevent secondary or chronic conditions;
3. reduce injury/illness related absenteeism;
4. drive a positive workplace health and safety culture.

Benefits of early intervention

What are the benefits for workers?



Positive recovery outcomes



Early treatment can increase a worker's ability to remain at work whilst they recover



Early access to treatment resulting in reduced length of time away from work



Reduced likelihood of further absence due to sickness



Increased trust in their employer's ability to support their injury

What are the benefits for you as the employer?



Fostering a productive and supportive work environment



Demonstrating that management is committed to workers' health, safety and wellbeing



Increasing the likelihood of return to work



Reducing the cost of incapacity and, in the long term, premiums



Reducing indirect costs such as lost productivity, recruitment and training costs for replacement staff

Early Action is Key

Assess the complexities of the situation and plan for the return to work.

After discussion with the worker, take steps toward resolving any workplace issues that contributed to the injury or illness.

Arrange to communicate with the worker frequently during their recovery. A simple phone call, or a card can make the worker feel cared for. If the worker feels valued they are more likely to return to the workplace as soon as possible.

Communicate with co-workers about the issue and address any health and safety concerns.

“What happens during the first five minutes after an injury, sets the tone for everything that follows. Respond to the worker in a way that shows they are valued, and they are likely to respond in kind”.

Emergency	Urgent care	Non-urgent care
<ul style="list-style-type: none">• Call 000.	<ul style="list-style-type: none">• Arrange an immediate doctor's visit, or take the worker to the hospital (if it is after hours)	<ul style="list-style-type: none">• Do you or the worker need a medical opinion? If so, arrange a doctor's appointment at their convenience.
<ul style="list-style-type: none">• Contact the worker's family	<ul style="list-style-type: none">• Accompany the worker	<ul style="list-style-type: none">Should the worker go home or stay at work?
<ul style="list-style-type: none">• Accompany the worker to the hospital	<ul style="list-style-type: none">• Make sure they get home safely	<ul style="list-style-type: none">• Are their alternative duties they could undertake while they aren't 100% fit?
<ul style="list-style-type: none">• Let co-workers know what is happening	<ul style="list-style-type: none">• Pay the bill	<ul style="list-style-type: none">• Discuss the options with the worker.
		<ul style="list-style-type: none">• Listen to what the person needs and be aware that they may not want to be troublesome.

RTWC role in Early Intervention

- ▶ **Establish rapport**
- ▶ **Communicate with relevant parties**
- ▶ **Understand the injury and any relevant issues**
- ▶ **Assess health needs**
- ▶ **Ensure best possible treatment**
- ▶ **Set up the conditions for a return to work**

Regular communication is vital to effective injury management - talk to the injured worker, the doctor, supervisors and co-workers.

Relationship with GP

If the doctor knows how you work and what you can do for their patient, they are more likely to work with you. You can let the doctor know about this in many ways:

- ▶ Attend first and subsequent medical appointments with the worker.
- ▶ Via a letter that accompanies the patient that outlines what you can do and available suitable duties.
- ▶ Via an email, fax or call before the worker is seen.

The communication should let the doctor know:

- ▶ You care about the employee
- ▶ You care about the outcome
- ▶ How you can accommodate them in the workplace
- ▶ Your willingness to assist in best practice care
- ▶ That you would like a call or communication from the doctor about the outcome of the consultation.
- ▶ That you will pay for the associated costs.

One of the best ways to establish a positive relationship with the doctor is for the employer to have a good relationship with the employee. The doctor's primary relationship is with their patient, so if the patient (employee) is positive about the workplace the doctor will usually "follow suit".

Addressing Psychological Issues

Resolution of the issues that could lead to a psychological claim should begin immediately. Once 48 hours has passed, the opportunity for early resolution of a psychological problem reduces. People become more entrenched in their point of view and disputes escalate.

Communication within the first 48 hours should establish the key issues, develop a plan to deal with them, including addressing the return to work approach.

Key managers should be aware of the negative morale, well being and financial impact of a poorly managed psychological case. They should be actively involved with resolution of the issues before 48 hours has elapsed.

Return to Work (RTW) Programs - Best Practices

- ▶ Develop workplace policies that include a formal RTW program and policy statement;
- ▶ Establish preferred health care providers;
- ▶ Assign responsibility and procedures for immediate injury reporting and ongoing contact with injured worker;
- ▶ Develop job descriptions including physical job demands;
- ▶ Identify suitable duties available across business;
- ▶ Communicate RTW policy, purpose and responsibilities to all parties (employees, managers, HR, WHS, healthcare providers);
- ▶ Support RTW, in any capacity, as soon as medically appropriate.

RTWSA's Employer Skill Building Programs

- ▶ Ongoing injury management training is provided through RTWSA and attendance is recommended to assist with maintaining best practices standards across the CCES' self-insurance licence.
- ▶ All events are free of charge and are valuable for anyone supporting injury management such as Managers, Return to Work Coordinators, WHS, People and Culture, etc
- ▶ RTWSA's skill building program also includes a number of short, pre-recorded webinars aimed at Return to Work Coordinators and employers. To watch any available webinars, visit RTWSA's [pre-recorded webinar page](#).

RTWSA's Employer Skill Building Programs

Core learning

Introductory workshops for Return to Work Coordinators and employers to gain greater understanding of the Coordinator role, how to support recovery and return to work and create mentally healthy workplaces.

Return to Work Coordinator fundamentals (refresher training)

Supporting return to work – A guide for Managers

Demystifying suitable employment

Introduction to Mentally Healthy Workplaces

Enhanced learning

Increase knowledge and skills to effectively manage recovery and return to work and create a sustainable healthy workplace by taking a deeper dive into various areas of return to work, injury management and wellbeing.

Managing psychological injuries & claims

Understanding premiums & minimising impact

Applications for review: Understanding the dispute resolution process

Maximising scheme supports & services to assist your workers recovery

Managing psychological hazards and risk, with SafeWork SA

Managing psychosocial issues of musculoskeletal disorders

Building your workplace wellbeing program

The flexible workplace: Managing hybrid work environments

Small business basics: An introduction to return to work and mentally healthy workplaces

Thriving with SuperFriend: A Mentally Healthy Workplaces series

Facilitated by mental health organisation SuperFriend, this workshop series will provide workplaces with strategies and tools to support mental health, and help their business to thrive so everyone can perform at their best.

Supportive conversations in the workplace: Checking in and showing you care

A focus on you: Creating a culture of self-care in the workplace

Promoting positive mental health in times of challenge: Preventing stress, fatigue and burnout

Exploring the elements of a thriving workplace, with Superfriend

Breaking barriers with the experts

A selection of Q & A workshops where participants can seek guidance from professionals, share their experiences and develop strategies to overcome recovery and return to work barriers.

Managing musculoskeletal injuries with a **Physiotherapist and Exercise Physiologist**

Building relationships and influencing capacity with a **General Practitioner (GP)**

Supporting psychological recovery and return to work with a **Psychologist**

Partnering with your **Claims Agent and Mobile Claims Specialist** to deliver outcomes

Train the Trainer

Delivering an introduction to mentally healthy workplaces

Developed specifically for large employers (including self-insured employers), this half-day program provides participants the tools to deliver mentally healthy workplaces training within their own organisation.

To express interest in this program, email mentallyhealthy@rtwsa.com

One day program

Adelaide

Port Augusta

Port Lincoln



PAYROLL REIMBURSEMENTS

Designated Periods for Income Support

Designated Period	Period Covered (from first date of lost time)	AWE Rate	Calculation	Example AWE is \$840 Earning of \$350
First Designated Period	0 - 52 weeks	100%	AWE rate - Earnings (if any) = IS payable	\$840 -\$350 = \$490
Second Designated Period	53 - 104 weeks	80%	AWE rate - Earnings (if any) X 80% = IS payable	(\$840 -\$350) X 80% = \$392

If a worker is not deemed “seriously injured” their entitlement to income support ceases automatically at the end of the second designated period.

Timeliness of Payments

In accordance with the Return to Work Regulations 2015, employer must ensure Income Support payments are paid promptly;

The act allows delays in weekly payments to be paid to injured workers in arrears and increased by interest at the prescribed rate within **one calendar month**;

No interest is payable if the delay is attributable in some part to a fault of the worker.

Lodging Reimbursements

CCI Wage Reimbursement Form and the corresponding payslips (for RTWSA audits) should be provided within one month of payment to injured worker;

The benefits of this will ensure:

- ▶ Employers receive lost time funds back in their business account in a timely manner;
- ▶ Employers reduce the outstanding liability on their claim estimates;
- ▶ CCI can finalise claims as soon as practicable;
- ▶ CCI's claims team can focus on return to work and treatment support, rather than claims administration.

Wage Reimbursement Form

The Wage Reimbursement Form will assist you to calculate the rate owing to the injured worker;

Complete details of the pay week, AWE, capacity for work and any earnings from employment.

Week for compensation			Rate of Pay		Total Earnings	Capacity for work	Pre-injury Hours	Hours Worked	Hours not worked (to be claimed)	Total Reimbursement
From	to	To								
25/07/22	to	31/07/22	\$840.00	-	\$0.00	No capacity for work (Unfit)	38.00	0.00	38.00	\$840.00
1/08/22	to	7/08/22	\$840.00	-	\$325.00	Some Capacity for work (Rest)	38.00	15.00	23.00	\$515.00

