

# Key findings: Targeted audit campaign – Insurer Rehabilitation and return to work plans

MARCH–SEPTEMBER 2024

Workers' Compensation Regulatory Services (WCRS) performed 29 targeted audits of all Queensland workers' compensation insurers focussed on rehabilitation and return to work plans, between 1 March and 13 September 2024.

While this report provides an overview of overall insurer performance in relation to rehabilitation and return to work plans, insurers are implementing the findings arising from their own individual audit reports.

## Why this is important

Evidence shows that return to work planning improves return to work outcomes.<sup>1</sup> Better outcomes are achieved by a supportive, tailored and person-centred approach. The injured worker should be at the centre of and consulted in return to work planning with their insurer, employer and treating health providers working collaboratively towards a shared goal.<sup>2</sup>



The audit did not audit to the standard of the new laws around rehabilitation and return to work plans made by the Workers' Compensation and Rehabilitation and Other Legislation Amendment Act 2024 that commenced on 23 August 2024.

These new laws now require an insurer to have a written rehabilitation and return to work plan in place within 10 business days of a claim being accepted.

The targeted audit was designed to:

- assess how well Queensland workers' compensation insurers are meeting their obligations in relation to rehabilitation and return to work plans
- identify areas of better practice and opportunities for improvement
- assist in evaluating and reviewing the rehabilitation and return to work guidelines for insurers to ensure they are effective in positively impacting worker experience and rehabilitation and return to work outcomes, remain evidence-based and provide practical guidance for insurers.

**The audit identified that across all files audited, **five of 29** audits met the minimum requirements for rehabilitation and return to work plans, which were:**



- ✓ The insurer developed the rehabilitation and return to work plan in consultation with the worker and the worker's employer and treating medical provider.
- ✓ The rehabilitation and return to work plan included the objective/s and steps to reach the objective/s.
- ✓ The insurer maintained the rehabilitation and return to work plan.
- ✓ The insurer shared a copy of the worker's rehabilitation and return to work plan with the worker and the worker's employer and treating medical provider.



**Insurers have been called to act now to improve through individual improvement action plans to:**

- review their systems and processes and ensure they are complying with legislative requirements and the rehabilitation and return to work guidelines for insurers
- review their individual rehabilitation and return to work plan targeted audit campaign report and consult with their staff to identify trends, reveal gaps and highlight areas to improve and build capacity and competency in relation to return to work planning
- look for ways to implement remediation plans to continuously improve, monitor and review quality assurance, and employ a person-centred approach to the rehabilitation and return to work journey
- consult with workers to identify opportunities to improve their approach to rehabilitation and return to work planning
- recognise and promote the value of rehabilitation and return to work planning, and invest time, effort and resources to improve performance.

# Background

## Legislative requirements

Workers' compensation laws require insurers to support a worker's rehabilitation and return to work. This includes:

- All Queensland insurers must have a rehabilitation and return to work program that is submitted for accreditation by the Workers' Compensation Regulator. Once it is accredited, it is called an accredited rehabilitation and return to work program.

An accredited rehabilitation and return to work program is a summary of the system that an insurer will use to manage the rehabilitation and return to work of workers with work-related injuries or illnesses, or to maximise their independent functioning. It explains how an insurer will facilitate early, safe and durable rehabilitation and return to work, including the use of rehabilitation and return to work plans. An insurer's accredited rehabilitation and return to work program must be consistent with the requirements of the [Workers' Compensation and Rehabilitation Act 2003](#).

- An insurer must also develop a rehabilitation and return to work plan for all workers who are injured at work. It must:



outline a worker's rehabilitation objectives and steps to achieve the objectives



be developed in consultation with the worker, their employer and treating medical provider/s.

## Our evidence base

The [rehabilitation and return to work guidelines for insurers](#) (May 2023) were developed to help insurers understand their obligations and provide practical, evidence-based guidance.

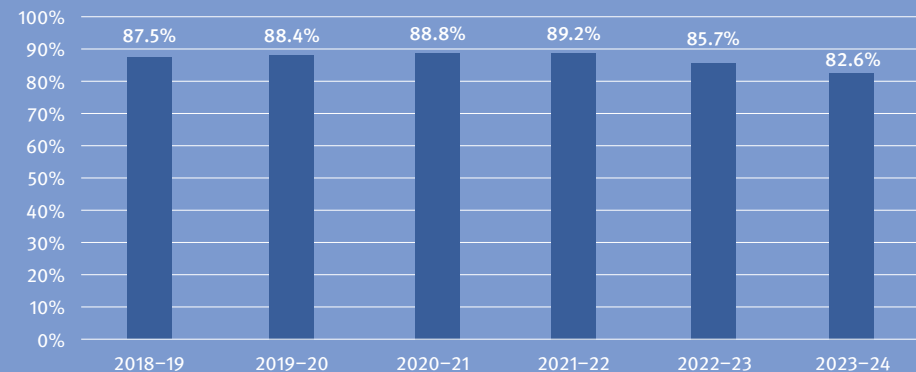
This is because the [2021 Safe Work Australia National Return to Work Survey](#) results noted that while Queensland's return to work rate was above the national average, Queensland workers were less likely (61.9 per cent compared to 67.2 per cent national average) to have a rehabilitation and return to work plan in place.

The results also noted that Queensland workers:

- had concerns relating to a lack of employer support and information about their rights and responsibilities relating to rehabilitation and return to work
- were less likely to have received contact from an employer-appointed rehabilitation and return to work coordinator
- for those with psychological illness claims who were contacted by their employers, these interactions were considered 'stressful'.

The survey results were supported by intelligence gathered through complaints and claims and rehabilitation compliance audits, and [declining scheme return to work data performance](#). Data also indicates that over the past five years, the return to work rate for workers who are away from work for more than four weeks due to a work-related injury has reduced from 88.4 per cent in 2019-20, to 82.6 per cent in 2023-24. This highlighted opportunities for insurers to improve performance in relation to rehabilitation and return to work plans.

### Return to work rate (greater than four weeks time lost, all injuries)



The guidelines were also informed by extensive consultation with all scheme stakeholders, including insurers, and employer, worker, legal and allied health representatives.

The approach outlined in the [Rehabilitation and return to work plan guideline - for insurers](#) is supported by evidence, including the [It Pays to Care](#) report, which highlighted that setting return to work goals and mapping out a return to work plan with an injured worker and their supervisor were key elements for better outcomes.



# The audit

## Scope

- All workers' compensation insurers in Queensland were audited.
- A representative sample of claim files were selected with an admitted status from 1 July 2023 onwards and included medical expenses only claims, time lost claims, physical claims, psychological claims, and physical and psychological claims.
- Insurers were not provided with file details prior to the audit.

## Key results

The audit revealed significant opportunities for insurers to improve.

**The audit identified that that across all files audited,**



audits did not meet minimum requirements for rehabilitation and return to work plans. Five out of 29 audits met minimum requirements.

**Of audited claims for all insurers,**



of claims did not meet the minimum requirements.



of claims that did not meet the minimum requirements did not have a rehabilitation and return to work plan.

In the 61 per cent of claims that had a rehabilitation and return work plan:

Minimum requirement	✓	✗
The insurer developed the rehabilitation and return to work plan in consultation with the worker and the worker's employer and treating medical provider.	60.6%	39.4%
The rehabilitation and return to work plan included the objective/s and steps to reach the objective/s.	90.4%	9.6%
The insurer maintained the rehabilitation and return to work plan.	75.8%	24.2%
The insurer shared a copy of the worker's rehabilitation and return to work plan with the worker and the worker's employer and treating medical provider.	73.3%	26.7%

The following criteria were not minimum requirements but were considered to assess insurer performance.

In the 61 per cent of claims that had a rehabilitation and return to work plan:

Performance observations	✓	✗
The rehabilitation and return to work plan was developed in a reasonable timeframe (within 20 business days of claim acceptance).	63.9%	16.1%
The rehabilitation and return to work plan was fit for purpose.	50.3%	49.7%
The rehabilitation and return to work plan aligned to the work capacity certificate.	78.0%	22.0%

# A 'fit for purpose' rehabilitation and return to work plan

A rehabilitation and return to work plan is not only a planning tool that sets out the steps involved in a worker's rehabilitation and recovery, but also a communication tool that helps support successful outcomes.

## A fit for purpose rehabilitation and return to work plan



is written clearly and succinctly and can be understood by all stakeholders



contains clear headings to prompt the person developing the plan to record the required information



includes current, complete and concise information about a worker's injury, treatment, functional capacity and recovery progress



clearly outlines steps, timeframes, and roles and responsibilities.

A fit for purpose rehabilitation and return to work plan is tailored to a worker's unique individual circumstances. It contains specific and current information regarding suitable duties, functional capacity and treatment. Medical information or recovery guidelines are used to estimate timeframes. The plan is maintained, clearly outlining the worker's recovery journey across each version of the plan.



## Case study: Effective consultation

A worker sustained a physical injury to their knee, requiring treatment from a physiotherapist and suitable alternative duties during their recovery.

Their insurer developed an initial rehabilitation and return to work plan within three business days of the claim being accepted. To draft the plan, the insurer spoke with the worker, their rehabilitation and return to work coordinator, general practitioner and physiotherapist. The insurer considered and reflected the information recorded in the worker's *Work Capacity Certificate – workers' compensation*.

When the insurer was initially unable to reach the worker on the phone, they emailed the worker the draft plan, highlighting areas to be confirmed. The insurer's email clearly explained the purpose of a rehabilitation and return to work plan, and invited and encouraged the worker to play a central role in developing their plan. The insurer requested to arrange a convenient time to phone the worker back to explain, discuss and review the plan.

After a phone call with the worker, the insurer finalised the rehabilitation and return to work plan and shared it with the worker, their employer and rehabilitation and return to work coordinator, and the worker's doctor, inviting feedback.

The insurer also proactively maintained the plan when the worker's circumstances changed, and repeated a genuine consultation process each time the plan was updated. The insurer invested time in return to work planning early in the claim and as a result, consultation and plan updates and support from the return to work team was swift.

The worker returned to work on suitable duties while receiving treatment. Their suitable duties program was monitored and modified as they recovered and their capacity improved, until they were able to return to their pre-injury role four months following their injury.



# Achieving an informed worker-centred approach for a short-duration claim

Insurers must take all reasonable steps to coordinate the development of and maintain a rehabilitation and return to work plan for all workers who have sustained an injury.

This includes for claims where there was not an ongoing entitlement for compensation when the claim was lodged (i.e. the claim was lodged after the worker had returned following up to one week time off work due to their injury), short duration claims, and claims that were closed on the same day they were accepted.

For claims for medical expenses only (no time lost) and when a worker is certified fit to return to full pre-injury duties within seven calendar days of their injury, a documented file note with specific details and dates may replace a full rehabilitation and return to work plan. The purpose of this file note is to support rehabilitation and return to work by:



verifying the worker's return to pre-injury duties



identifying any ongoing rehabilitation and return to work needs



providing the worker with information about how to access rehabilitation and return to work supports



ensuring appropriate medical information and discussions with both the worker and employer are considered.

The file note must reflect and follow a conversation with the injured worker, as well as their employer, rehabilitation and return to work coordinator and treating medical provider (as required).





## Example of a file note in place of a Rehabilitation and return to work plan

### FILE NOTE - Claim Number: EXAMPLE-2075

**Date:** 02/08/2023

*This FILE NOTE is in place of a documented Rehabilitation and return to work plan.*

Mr Joe Smith is a 32-year-old employed full-time as a Labourer with XYZ Construction. Mr Smith has worked in his current role since 29 March 2020.

**Reported date of injury:** 17/07/2023

**Claim lodgement date:** 22/07/2023

**Claim acceptance date:** 22/07/2023

**Mechanism of injury:** While using a shovel to collect concrete from a chute, the worker bent down and the chute operator flicked up the chute, hitting the worker on the eyebrow and splitting his eyebrow open.

**Diagnosis:** Lacerated left eyebrow

**Treatment:** Treatment required from 17/07/2023 to 17/07/2023 – sutures, topical antibiotic, oral analgesia. No further medical review or treatment required as of 25/07/2023.

**Return to work:** Certified fit for pre-injury duties as per Work Capacity Certificate issued by Dr M Johnson (Spring Hill Medical Centre) dated 25/07/2023.

**Rehabilitation and return to work coordinator:** Katie Jones;  
KJones@XYZ.com.au; 0487 782 324.

**Confirmed that worker has been informed of their rights and responsibilities and acknowledges the above information:** Sue Harold, Claims Manager, 02/08/2023.





## Next steps

### Insurer call to action

- **Prioritise the worker as the focal point and employ a person-centred approach** to the rehabilitation and return to work journey.
- **Review your individual rehabilitation and return to work plan targeted audit campaign report** and consult with your staff to identify trends, reveal gaps and highlight areas to improve. This consultation may inform your improvement action plan, which may include a goal focused on building capacity and competency of staff in relation to return to work planning. It may also include providing training in:
  - how to apply a person-centred approach to develop tailored or individualised plans in consultation with a worker
  - soft skills, to help support workers to recover and return to work.
- **Review your systems and processes** and ensure you're complying with legislative requirements and the rehabilitation and return to work guidelines for insurers.
- **Look for ways to improve your quality assurance program** to continuously monitor and evaluate the effectiveness of your systems and processes and implement remedial actions.
- **Consult with injured workers** to identify opportunities to improve your approach to rehabilitation and return to work planning.
- **Recognise, understand and promote** the value of rehabilitation and return to work planning. Invest time, effort and resources to improve how you undertake rehabilitation and return to work planning. If support is needed, consider engaging a workplace rehabilitation provider to provide training and to assist in developing and/or implementing rehabilitation and return to work plans, particularly for complex claims.

### What is WCRS doing?

WCRS is:

- **updating the rehabilitation and return to work guidelines for insurers** to reflect the new laws that require an insurer to have a written rehabilitation and return to work plan in place within 10 business days of a claim being accepted
- **continuing to monitor and report** on performance relating to rehabilitation and return to work plans, including monitoring improvement action plans required as a result of this audit
- **developing further education** for insurers and claims managers relating to why rehabilitation and return to work planning is important, focusing on the person at the centre of the plan
- **participating in Safe Work Australia's National Return to Work Survey**, which provides insights into return to work processes and outcomes of injured workers receiving workers' compensation in Australia and allows a better understanding of an injured worker's experience of return to work.



## References

- <sup>1</sup> Sheehan, LR., Lane, TJ., Gray, SE., Beck, D. and Collie, A. 2018. Return to Work Plans for Injured Australian Workers: Overview and Association with Return to Work. Monash University. Retrieved September 2022 from Return to Work Plans for Injured Australian Workers: Overview and Association with Return to Work (monash.edu)
- <sup>2</sup> Safe Work Australia. 2018. Taking Action: A best practice framework for the management of psychological claims in the Australian workers' compensation sector. Retrieved September 2022 from <https://www.safeworkaustralia.gov.au/system/files/documents/1902/taking-action-framework-2018.pdf>

Australian Faculty of Occupational and Environmental Medicine (AFOEM). 2022. It Pays to Care' – Bringing evidence-informed practice to work injury schemes helps workers and their workplaces; A values and principles based approach. Retrieved September 2022 from It Pays to Care (racp.edu.au)

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Cullen, K, Irvin, E and Collie, A et al. March 2018. "Effectiveness of workplace interventions in return to work for musculoskeletal, pain-related and mental health conditions: an update of the evidence and messages for practitioners." *Journal of Occupational Rehabilitation* 28(1): 1-15. doi: 10.1007/s10926-016-9690-x.

## Contact us

1300 362 128  
[worksafe.qld.gov.au](https://www.worksafe.qld.gov.au)

