

The Rehab Review

Issue 1, 2008

Welcome...

This edition of the Rehab Review features information on the new WorkCover lodgement processes and an article on Injury Management for cancer.

Our frequently asked questions address the issue of completing Graduated Return to Work Timesheet and Average Costs of WorkCover claims.

We have included articles on Major Depression Disorders and on WorkCover Data.

If you have any feedback on the Rehab Review newsletter or would like to contribute an article, please contact Nicola on 323 70789 or by email at nicola.barnes@deta.qld.gov.au

Amendments to Workers' Compensation Legislation

A number of amendments to the *Workers' Compensation and Rehabilitation Act 2003* came into effect on 1 January 2008. The major amendments to the legislation relevant to the management of workers' compensation claims include:

1. Insurers (including WorkCover) now have 20 business days to make a decision on an application for compensation. This applies to claims for both physical and psychological injuries. Previously insurers had 40 days to decide a physical claim and 60 days to decide a psychological claim.
2. An employee that is totally incapacitated from work will now be entitled to:
 - First 26 weeks of incapacity: 100% of their award wage or 85% of their normal weekly earnings.
 - 27 weeks to 2 years of incapacity: 75% of their normal weekly earnings.
 - Previously an employee who was totally incapacitated for more than 1 year generally received 65% of their normal weekly earnings.
3. Increasing the maximum lump sum compensation payable from \$182,620 to \$218,400. This means that the amount of any lump sum payment made by WorkCover on a statutory claim will increase.

A full summary of all the amendments to this legislation can be found at: <http://www.qcomp.com.au/corporate/thescheme/legislation/amendments.html>

Please also see the factsheet developed by the Department available at <http://education.qld.gov.au/health/injury/factsheets.html>

For further information about these amendments and the impact this may have on your workplace, please contact your local Senior Rehabilitation Consultant.

Injury Management - Cancer

Cancer is a term used to describe a range of diseases which begin in the cells of the body, causing abnormalities in the cells and the ways in which they divide to form new cells. Tumours are formed from the excess cells created in this process. Tumours may be malignant (cancerous) or benign (non-cancerous).

Cells in malignant tumours can invade and damage nearby tissue and organs. They may also break away and travel through the bloodstream or lymphatic system to form tumours in other parts of the body.

Most cancers are named for the organ or type of cells in which they begin. When cancer cells spread (metastasize) from their original location to another part of the body, the new tumour has the same kind of abnormal cells and the same name as the primary tumour. For example, if lung cancer spreads to the brain, the cancer cells in the brain are actually lung cancer cells. The disease is called metastatic lung cancer (not brain cancer).

Both the cancer and its treatment can produce a broad range of symptoms. Fatigue, pain, nausea, de-conditioning and "chemo brain" (foggy thinking) are common symptoms which impact on plans for returning to work.

The process of being diagnosed with cancer, and undergoing treatment, can result in a sense of losing control.

Returning to work can be important in establishing feelings of "getting back to normal" and of being in control.

It can help to maintain social and support networks as well as providing personal fulfilment and financial security.

It is important that managers understand that return to work plans allow people with cancer to be productive and reliable at work.

The James Cancer Hospital and Ohio State University have developed the following guidelines for employers:

- Don't participate in denial. Ask workers what they need and what resources can be identified to help.
- Don't reduce responsibilities without discussing it with the employee.
- If responsibilities must shift, seek the employee's help in delegating.
- Be flexible about work schedules.
- Be alert for signs of trouble from the employee or co-workers.
- Be willing to assign temporary jobs on an on-going basis.
- Inquire about whether the employee wants to work at the hospital or at home. (This can sometimes be accommodated).
- Provide educational opportunities for the worksite.

Co-worker guidelines include:

- Don't become a rescuer or pull away.
- Ask the co-worker with cancer how he or she wants to discuss the situation.
- Keep conversations confidential.
- Don't feel obliged to "cheer up" the person with cancer.
- Don't keep telling the person with cancer how courageous they are it puts a real burden on them to "over-perform".
- Offer to help where you can.

Frequently Asked Questions

Completing Timesheets whilst on a Graduated Return To Work Plan

All employees participating in a return to work plan must complete a 'Graduated Return to Work Timesheet' (Form CM12) each week for the **duration of the return to work plan**. Once this form has been completed and signed by you, your Supervisor and your Rehabilitation and Return to Work Co-ordinator, please forward this form to your Regional Office.

Public Servants are also required to complete the standard fortnightly timesheet, in addition to the Graduated Return to Work Timesheet. Hours not worked whilst on Q Super should be entered as 'Sick Leave' and hours not worked whilst on WorkCover should be entered as 'Other' on the standard departmental timesheet.

For further information, contact the Claims Officer in your region.

Major Depression

Depression is one of the most common forms of mental illness. It currently affects one in five Australians. There are a number of different forms of depression, the most common of these being Major Depressive Disorder.

Depression affects emotions, thinking, behaviour and physical wellbeing. Some common symptoms of depression include:

- Feeling sad and depressed for most of the day, nearly every day
- Loss of interest in previously enjoyed activities
- Lack of energy, feeling fatigued
- Changes in appetite, weight loss/gain
- Difficulty sleeping, or staying awake
- Poor concentration and impaired decision making
- Feelings of worthlessness or guilt
- Recurrent thoughts of death and suicide.

Not all people with depression will experience all of these symptoms. Sometimes, people with depression fail to seek help, because their symptoms act a barrier, because they are not aware that effective treatments are available or because of the stigma associated with mental illness.

Effective treatments include: antidepressant medications, cognitive behavioural therapy and interpersonal therapy. Medication can often be managed by a general practitioner, although a referral to a psychiatrist is sometimes warranted. Under managed care plans, doctors often refer people with depression for talking therapies with psychologists or other allied health professionals. Changes to Medicare funding have made these consultations more accessible.

Useful Resources

The staff matters website resource provides information about and ideas for the development of staff members own mental health and wellbeing in the workplace.

The staff matters resource takes a universal and mental health literacy approach within the educational working context and is available for all staff in all types of schools.

Further information can be found at

<http://cms.curriculum.edu.au/mindmatters/staff/>

Average costs and duration of WorkCover claims

As this is the first newsletter for 2008, it may be of interest to review some of the previous year's performance. Overall during the 2007 calendar year there were 2991 claims closed with an average statutory cost of \$5,738 and an average duration of 21 days.

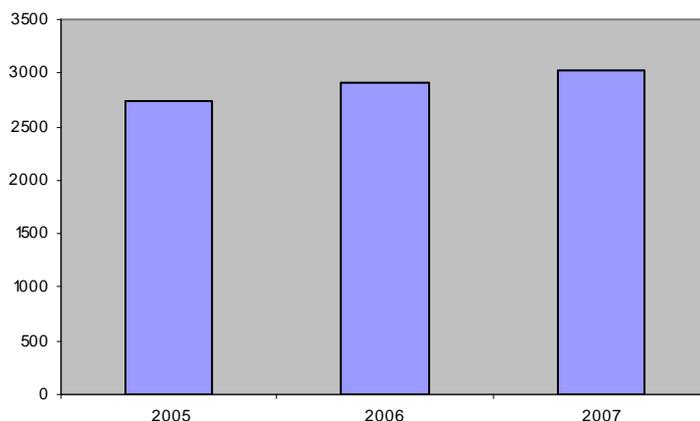
These figures represented a 19% increase in the average cost and 11% increase in the average duration compared to the 2702 claims closed in the 2006 calendar year.

Did you know that the average statutory cost for strain/sprain injury claims is currently \$4,222 with an average duration of 18 days and the average statutory cost for psychological injury claims is \$29,821 with an average duration of 103 days.

WorkCover Data

The following graphs highlight claims performance over the last 3 calendar years. Claim numbers for 2007 increased by 4% compared to the previous year, whilst total claim costs remained static which is a pleasing result.

WorkCover Claims Lodged per Calendar Year



WorkCover Statutory Payments per Calendar Year

