



ACT Health

Early Intervention

Preventing physical and mental workplace injury

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Purpose

This procedure:

- supports employees who are at risk of physical or psychological workplace injury (including an aggravation of an existing condition), to remain at work in some capacity or achieve a return to work sooner than would otherwise be possible;
- contains information to assist managers and employees (including permanent and temporary employees) to implement effective early intervention programs and prevention strategies;
- supports the ACTPS Managing Injury and Illness in the Workplace Policy Statement and the ACT HD Work Health and Safety Policy; and
- aims to reduce the potential human and financial impact of workplace injuries.

Scope

Early intervention programs are designed to assist an employee who is may be at risk of a workplace injury. Indications that an employee may be at risk include experiences of physical pain or psychological stress. Early action to address the potential signs of injury has been shown to have a positive impact on:

- durable recovery and return to work;
- workers' compensation costs;
- employee engagement; and
- workplace productivity¹.

This procedure:

- applies to the management of all new or potential workplace injuries (including an aggravation of an existing condition) experienced by employees;
- does not apply when an employee has lodged a claim for workers compensation (in which case the CMTEDD Injury Management Team will appoint a rehabilitation case manager to develop a rehabilitation program); and
- does not apply to contractors, including workers engaged under labour hire contracts².

1 Early Intervention Report, Comcare, October 2014.

2 Labour hire workers are expected to be able to use standard adjustable workstations and can use the guided self-help intranet information about [using a workstation](#). Labour hire providers are responsible for managing early intervention for their employees.

Roles and Responsibilities

Position	Responsibility
Employees	<p>Report workplace incidents and injuries to their manager (and in a Riskman work injury report, if required), including:</p> <ul style="list-style-type: none"> • where the employee is experiencing symptoms of a work injury (such as pain or discomfort); • is experiencing workplace stress; or • is experiencing an aggravation of an existing medical condition.
Managers	<p>Responsible for:</p> <ul style="list-style-type: none"> • monitoring the early warning signs that might indicate that an employee is at risk (Refer to Attachment A); • supporting employees; • approving financial expenditure; and • purchasing additional equipment.
People Strategy	<p>Responsible for:</p> <ul style="list-style-type: none"> • monitoring Riskman work injury reports; • providing guidance to employees and managers; • working with external providers; and • monitoring and ensuring compliance with this guideline. • coordinating the engagement of: <ul style="list-style-type: none"> ○ early intervention services; and ○ case management services for non-compensation cases.
Injury Management Team Chief Minister, Treasury and Economic Development Directorate (CMTEDD)	<ul style="list-style-type: none"> • Provide rehabilitation services. • Provide case management services for specific non-compensation cases. • Manage contracted service providers, including claims management, early intervention and rehabilitation providers.

Procedure

Objectives

Early intervention programs are designed to provide an appropriate response, as soon as possible after an injury, incident or symptoms emerging, to minimise the impact on the individual's health and/or their ability to continue to work.

The early intervention program for an employee who sustains (or is at risk of sustaining) a physical or psychological injury at work will be designed to address their specific requirements.

Inclusions

The early intervention program can include one or more of the following types of support:

- short term treatment³, for example six to eight physiotherapy treatments or counselling sessions;
- a short workplace-based program by an injury management practitioner (for example a physiotherapist, occupational therapist, exercise physiologist, or rehabilitation counsellor) who will undertake activities such as:
 - liaising with the employee's treating practitioner/s;
 - assessing the workplace/workstation and job role and making recommendations for change, such as temporary changes to duties or hours;
 - monitoring the recovery progress;
- providing psychological support for staff experiencing stress, which could also involve the Employee Assistance Program or a private practitioner; and
- action to address workplace issues where relevant, such as mediation services or independent support from the [Employee Advocate](#).

Early intervention programs are a discretionary administrative expense that is applied to manage the ACT HD's financial, work health and safety (WHS) and injury risks. This procedure does not create any additional entitlement for staff.

³ Medical treatment must be evidence based to be considered for early intervention, but medication costs are excluded. Medical treatment costs will be capped at the rate recommended by the relevant industry association, such as the Australian Medical Association, or the rate specified by Comcare (for example for [Physiotherapy services](#)), whichever is the lower.

Employees who are absent from work as a result of an illness or injury should apply for personal leave, in accordance with the relevant enterprise agreement. There is no provision for additional granting of leave⁴.

Assessment of Early Intervention Requirements

Early reporting of incidents and injuries enables appropriate and timely, medical and early intervention assistance to occur. An employee (or their manager) is required to submit a Riskman work injury report, in accordance with WHS procedures. The manager should record any corrective action and indicate if the employee requires additional assistance in the report.

The manager may identify that an employee is at risk of injury based on warning signs and it may not be appropriate to commence the process with a Riskman report.

In this case the manager should:

- talk to the employee about their wellbeing; and/or
- contact People Strategy to discuss their concerns.

People Strategy will review each Riskman work injury report and consult with the employee and manager, as required, to assess whether a guided self-help approach, a workstation assessment⁵ or early intervention strategies are required.

People Strategy will discuss options for treatment, management and support with the employee and their manager, including:

- a rehabilitation program;
- referral to an early intervention service;
- a referral to the [Employee Assistance Program](#);
- general practitioner⁶ supported treatment programs (such as a Medicare mental health care plan); or
- accessing personal health insurance benefits⁷.

⁴ If an employee submits a claim for workers' compensation and the claim is accepted, personal leave taken for the accepted condition is covered by workers' compensation incapacity payments and personal leave is recredited.

⁵ Refer to the Workstation Assessment Information Sheet.

⁶ While staff do not have to see their General Practitioner (GP) before an early intervention program is considered, staff are recommended to consult their GP to assist with the diagnosis and treatment of any medical condition.

⁷ Private health insurance benefit may include allied health practitioner treatment.

Employees:

- are not required to accept any specific early intervention assistance provided by ACT HD;
- should understand that early action to prevent and manage a potential injury has been demonstrated to have a positive impact on recovery; and
- are required to take reasonable care for their own health and safety in accordance with the *Work Health and Safety Act 2011*.

Early Intervention Programs

Where a short workplace-based early intervention program is approved:

- People Strategy will engage a provider and provide contact details for the manager and staff member; and
- the provider will:
 - liaise directly with the manager and the staff member to manage the program – including attending the workplace to inspect the work and recommend any changes;
 - liaise with the treating practitioner/s, with the written consent of the staff member;
 - provide verbal progress reports to the manager; and
 - provide a closure report to People Strategy.

Where allied health treatment (generally physiotherapy, exercise physiology or chiropractic treatment for physical injuries or psychology services for workplace stress) is recommended, the services may be provided by:

- a practitioner recommended by the treating doctor;
- an early intervention services provider (or a practitioner recommended by the provider) that assists with musculoskeletal injuries by way of treatment and advice, including:
 - exercise programs and education;
 - manual therapy;
 - education;
 - injury prevention; and
 - workplace ergonomic assessments, consultancy and problem-solving.

Where ACT HD provides funding for allied health treatment People Strategy will advise the employee:

- about the services that have been approved and the costs involved;
- about the billing arrangements (note: many service providers require payment at the time of service);

- that the cost of any missed appointments must be met by the employee and will not be reimbursed;

The employee may:

- provide consent for their treating practitioners to provide information to People Strategy and the early intervention service provider/s⁸;
- make any bookings and attend appointments;
- pay any costs that exceed the approved amount; and
- provide original invoices to ACT HD for re-imburement.

Where an employee submits a workers' compensation claim, People Strategy will provide information to the Injury Management Team about any early intervention action that has been taken. The Injury Management Team will then appoint a case manager, who will consider what injury management or rehabilitation actions should be taken. ACT HD early intervention assistance will usually cease at this point, and the Injury Management Team (CMTEDD) will implement the rehabilitation procedures.

Rehabilitation programs for staff who submit a workers' compensation claim are managed, in accordance with the ACTPS Managing Injury and Illness in the Workplace Policy Statement.

Financial Arrangements

Some early intervention services are available within the ACT Public Sector without a direct administrative cost to the business unit. All other costs are a business unit administration expense.

Where applicable, People Strategy will forward a request to the relevant manager to approve the early intervention expenditure⁹. The request will include recommendations about the early intervention program and seek financial approval up to a specified amount. Generally, the expenditure for an early intervention program should not to exceed \$4,000.

Speed of action is one of the key requirements for effective early intervention. Managers should approve or reject the request as soon as practicable, and preferably within three days.

Where the early intervention program is approved to cover medical treatment costs, the costs are capped at the rate recommended by the relevant industry association, such as the Australian Medical Association, or the rate specified by Comcare (for example for [Physiotherapy services](#)), whichever is the lower.

⁸ It is up to the employee to decide to provide consent or not. However, ACT HD may not be able to provide early intervention programs if consent is withheld.

⁹ The manager must hold the financial delegation for the amount approved for that cost centre.

Where ACT HD needs to engage an external service provider or provide a worker with specific equipment the procurement is a business unit expense and should be undertaken using the procedures for a [Procurement under \\$25,000](#). People Strategy can provide information about the suppliers that have been used previously.

Where information technology (IT) equipment, such as a vertical mouse, is required it must be compatible with the current and planned IT hardware and software. Managers can check this by contacting Digital Solutions on 5124 5000 or digital.support@act.gov.au.

Where an individually allocated task chair or IT equipment is purchased, it remains the property of ACT HD, but should move with the worker as they change jobs in ACT HD. Where the worker transfers to another directorate the asset/s can be transferred between the directorates with the agreement of both parties.

Records Management

All records about early intervention programs must be managed in accordance with the *Territory Records Act 2002*, *Information Privacy Act 2014*, *Health Records (Privacy and Access) Act 1997* and ACT HD policies and procedures.

Early intervention program records must be retained for 75 years in accordance with the retention and disposal schedule.

Implementation

This procedure will be published on the Human Resources Intranet page on HealthHQ and promoted to managers and workers.

Related Documents

Legislation

- *Information Privacy Act 2014*
- *Health Records (Privacy and Access) Act 1997*
- *Human Rights Act 2004*
- *Public Sector Management Act 1994*
- *Public Sector Management Standard 2016*
- *Safety, Rehabilitation and Compensation Act 1988*
- *Territory Records Act 2002*
- *Work Health and Safety Act 2011*
- *Enterprise agreements.*

Supporting Documents

- ACTPS Managing Injury and Illness in the Workplace Policy Statement
- ACT HD Work Health and Safety Policy
- Early Intervention for Injured Workers Fact Sheet - CMTEDD Workplace Safety and Industrial Relations Division

References

- First to Action: Early intervention to support psychological health and wellbeing (Comcare)
- Early Intervention Report, Comcare, October 2014.

Definitions

Term	Definition
Early intervention	Strategies to reduce the risk of a new or secondary condition ¹⁰ ; or An approach that seeks to reduce the impact of disability for individuals and the wider community by mitigating or alleviating the impact of a newly acquired, newly diagnosed or existing disability, and/or preventing the deterioration of an existing disability (Productivity Commission, 2011).

Search Terms

Early intervention/injury prevention/workstation assessment/workplace injury.

Version Control

Version	Date	Comments
1.0	8 June 2020	First Version

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¹⁰ Early Intervention Report, Comcare, October 2014

Attachment A – Warning Signs¹¹

Organisational	Behaviour	Physical and physiological
<ul style="list-style-type: none"> • increased unplanned absences • fatigue • working long hours • increased workplace conflict • low morale deteriorating work performance • use of grievance procedures • conflict with team members/manager • increased errors and/or accidents. 	<ul style="list-style-type: none"> • not getting things done • erratic behaviour • emotional responses • complaints of lack of management support • fixation with fair treatment issues • complaints of not coping with workload • withdrawn from colleagues • reduced participation in work activities • increased consumption of caffeine, alcohol, cigarettes and/or sedatives • inability to concentrate • indecisive • difficulty with memory • loss of confidence. 	<ul style="list-style-type: none"> • tired all the time • sick and run down • headaches • reduced reaction times • difficulty sleeping • weight loss or gain • dishevelled appearance • gastro-intestinal disorders • rashes.

¹¹ First to Action: Early intervention to support psychological health and wellbeing (Comcare)