

Know Your Rights

What to do if you are injured at work

To make a claim

I can make a claim by completing a claim form and providing the information to my manager or supervisor, along with a Work Capacity Certificate (WCC) supporting the claim, completed by my treating doctor.

Who can complete this form?

- I can complete it as an injured worker.
- My employer can complete it.
- A representative, such as my treating doctor, a first aid officer, or a relative or friend, can complete it.

Work Capacity Certificate (WCC)

If I lose time from work or intend to claim expenses, I must provide a WCC when submitting my claim form. The certificate must be completed by my doctor or a relevant medical expert. A certificate can also be completed by a nurse practitioner in an emergency department of a public hospital. Emailed certificates from my treating medical expert are also accepted. Any medical accounts and WCCs must be given to my supervisor/manager as soon as possible. I should keep a copy of the WCC for my own records.

Determining my claim

Catholic Church Endowment Society Inc. (CCES) is required to decide to accept or reject my claim as soon as possible. If the claim cannot be determined within ten (10) working days, then I will be offered Interim Payments. However, if my claim is rejected on determination, I will be required to pay back any money that has been paid under Interim Payments.

Any decision must be given to me in writing. Where the decision is to reject the claim, CCES must give me reasons and advise me of my rights to have the decision reviewed.

If my claim is accepted, and I have lost time, CCES will authorise my employer to pay Average Weekly Earnings (AWE) during my time off work. If I do not agree that the amount of AWE is correct, I should contact my Claims Management Business Partner in the first instance and discuss my situation, or I can apply to the SA Employment Tribunal (SAET) to review the AWE amount set on the claim.

CCES can pay any reasonable and necessary medical, travel, chemist, or similar expenses on accepted claim. I should submit all accounts and reimbursements (with my claim number attached) to my Claims Management Business Partner as soon as possible. Likewise, I can request these processes if my workers' compensation claim or any claim for reimbursement is rejected.

Recovery, Return to Work, and Rehabilitation

Assistance is available for me if I have a work injury and may have difficulty remaining at work or returning to normal work. When appropriate, an Injury Management Business Partner will be allocated to my claim to assist me with my recovery, RTW, and rehabilitation.

If I believe I require assistance to return to work, I should contact my Claims Management Business Partner to discuss.

Medical Expenses

Most types of standard medical expenses are covered under an accepted workers' compensation claim provided that they are necessary, reasonable, and reasonably incurred as a result of my current disability.

The following treatment providers are medical experts and can provide services for me in relation to my work injury:

- Legally qualified medical practitioners
- Occupational therapists
- Speech Pathologists
- Psychologists
- Dentists
- Physiotherapists
- Opticians
- Chiropractors

Other expenses that are covered include travel, therapeutic aids, tests, hospitalisation, and medications. Wherever possible, it is best to send accounts to CCES for direct payment to treatment providers. I should ensure each account has my name and claim number attached.

For CCES to consider any of the treatments on the above list or otherwise, the following must occur prior to starting a course of treatment:

- The treatment is recommended by the treating practitioner in writing; and
- Where a program is accepted as a reasonable and necessary medical cost by CCES and approved as part of a documented Recovery and RTW Plan.

Specific measurable goals are established by the treating medical expert which will include time frames and regular review to ensure positive outcomes are achieved.

Not all costs will be considered necessary and reasonable.

It should be noted that CCES will not authorise any maintenance programs or treatment. Once I have reached my maximum medical recovery, the responsibility of maintaining my fitness for work returns to me.

Reduction and cessation of weekly payments

Should my injury result in incapacity for work or a partial incapacity for work for more than 52 weeks from the first date of incapacity, then a step down to 80% of my Average Weekly Earnings (AWE) applies. CCES must advise me in writing at least 28 days before the reduction comes into effect. If I feel the decision is incorrect, I may apply to the SA Employment Tribunal (SAET) for a review of the decision. I am also encouraged to contact my Claims Management Business Partner to discuss this and/or to request an application of the Internal Dispute Resolution Process.

CCES is required to cease my income support 104 weeks after my first day of incapacity. This decision is not reviewable.

Permanent Impairment / Lump Sum Payments

If I am permanently impaired because of my work injury, I may be entitled to claim a lump sum for whole person impairment once my injury has stabilised. If I feel I have a permanent impairment due to my work injury, there is a fact sheet that may help explain the process. I should ask my Claims Management Business Partner for a copy of the fact sheet for lump sums. The payment of a whole person impairment lump sum in no way affects any other entitlement. CCES must advise me in writing of the amount and how it is calculated. I can apply to the Registrar of the SA Employment Tribunal (SAET) for a review if I disagree with the amount. If I wish an assessment to be made for whole person impairment, I should apply to my Claims Management Business Partner in writing.

Seriously Injured Workers

If I am seriously injured and have been assessed as having greater than a 35% whole person impairment, I am entitled to income support until the age of retirement (Commonwealth) and other benefits. I should ask for further information from my Claims Management Business Partner if I think I am seriously injured.

How to provide Feedback or Make a Complaint

If I am unhappy with any decision or process or am dissatisfied with the way services are delivered or the way my claim is managed, I can make a complaint or have my matter reviewed by Internal Dispute Resolution.

I should raise my concern/grievance directly with my Claims Management Business Partner. I should state my grievance in a clear, objective, and calm manner. I should be respectful and explain my concerns or grievance. I should allow my Claims Management Business Partner an opportunity to respond. Note: If I do not feel able or comfortable to approach the Claims Management Business Partner directly or my concern/grievance is of a serious nature, I should make a formal complaint.

I can make a formal complaint in writing to the CCES Director – Catholic Safety & Injury Management at dnation@csaim.org.au.

I should include the following information:

- My name and contact details.
- My claim number.
- The name of the agency/person my complaint is about.
- A clear outline of my complaint.
- Dates of the agency/person acts that I am concerned about.
- Any other key dates.
- Any documents to support my complaint.
- What I am seeking (the outcome I want).

I can also lodge a complaint to the Ombudsman SA via the portal <https://www.ombudsman.sa.gov.au> or the ReturnToWorkSA complaints team at complaints@rtwsa.com.

Have more questions?

CCES contact details are:

- Email: claims@csaim.org.au
- Phone: 8210 8101
- Website: Catholic Safety & Injury Management

Rights and Responsibilities

Catholic Church Endowment Society Responsibilities

- Prompt claims management.
- Ensuring all employees are informed about workers' compensation in their preferred language and are provided with interpreting services if required.
- Assessing recovery, return to work (RTW), and rehabilitation needs as soon as possible.
- Consulting with all parties to plan actions, responsibilities, and obligations for all parties which are reviewable.
- Supporting my recovery, RTW, and rehabilitation after a work injury.

My Responsibilities

- Notify my employer as soon as possible if I have suffered an injury in the course of my employment.
- Give my employer any paid accounts for reimbursement or invoices for expenses incurred promptly.
- Actively participate in activities designed to support my recovery and return to work.
- Participate and cooperate in developing a recovery and return to work plan.
- Work towards defined goals in my return-to-work plan.
- Provide current medical certificates that address my capacity for work and other relevant information.
- Return to suitable employment when able to do so.
- Ensure I do not provide any false or misleading information about my claim. This is an offense.

My Rights

- I am entitled to be paid income support if I am off work once an interim payment has been received or a claim for compensation is determined as a claim acceptance for income support.
- Once a payment has been determined as a reasonable cost, I have the right to have reasonable and necessary medical and other expenses paid promptly.
- I have the right to have a current copy of, and be meaningfully involved in, all decisions regarding my Recovery and Return to Work.
- I can raise any dissatisfaction with my allocated Injury and / or Claims Management with the Director of Catholic Safety & Injury Management.
- I have the right to see any doctor or specialist for treatment, as only my treating doctor (i.e., my own doctor) can treat me. However, I may be required to see the company doctor (but not for treatment).
- I am entitled to be provided with copies of all medical reports concerning my claim within seven (7) business days of my Claims Management Business Partner receiving them.
- I have the right to have a representative or a support person present at any meeting or hearing about my claim, such as a family member, solicitor, union representative, or advocate. My written authority is required.
- I have the right to have any personal information kept confidential unless it pertains to the injury, in which case it may be shared with those involved in the administration and management of my claim.
- I am entitled to have an interpreter at meetings and appointments if required.