

Injury Management Program

InFront is committed to the rehabilitation of injured workers. In consultation with our host employers and employees we have developed the following return to work program.

Identifying and providing suitable duties is an integral part of the Injury Management and return to work Program. When and if the injured/ill worker is, according to medical judgement, fit to return to work on suitable duties, we will discuss with the nominated treating doctor and/or rehabilitation provider whether suitable duties could reasonable be found at this workplace, and if not, what other options are available. Suitable duties may mean a change in job and/or hours and where retraining is necessary, it will be provided. This will be discussed with the injured/ill worker and confirmed in writing after agreement is reached.

Our commitments to the Return to Work (RTW) Program are:

- To return an injured employee to work as soon as possible (subject to medical opinion)
- To commence the occupational rehabilitation process as soon as possible after workplace injury
- To provide early access to rehabilitation services for workers who need them i.e. rehabilitation providers
- To maintain the confidentiality of rehabilitation records
- To provide suitable duties/employment in consultation with the host employers, where reasonably practicable, to injured employees and to otherwise assist them with their return to work in a safe and and proper manner
- To consult with our employees and to ensure that our return to work program operates effectively
- To ensure that participation in the Injury Management and/or return to work program will not prejudice an injured workers rights. It is the organisation's policy to fully inform such workers of their rights and obligations in relation to:
 - their right of choice of nominated treating doctor and rehabilitation provider
 - access to interpreter services where appropriate
 -]their non-participation in an Injury Management Plan or return to work program, which may result in suspension or reduction of weekly benefits
 - their nomination of a treating doctor who is willing to participate in the development of, and in the arrangements under an Injury Management Plan.



Employee's Responsibilities:

- Report to the Site Supervisor & InFront Staffing as soon as injury/incident has occurred
- Provide a copy of the incident report to InFront Staffing
- > Commence treatment of injury and comply with the Injury Management plan
- Authorise your treating doctor to provide relevant information for the purpose of the Injury Management Plan
- Attend all doctor's appointments and meetings with relevant parties (Case Managers, Rehab providers and InFront Staffing)
- If you are unable to return to pre-injury duties and InFront Staffing cannot provide suitable duties, you may be required to seek alternative employment by our insurer.
- > Make all efforts to return to work as soon as possible
- Sign a copy of your Injury Management Plan and return it to InFront Staffing ASAP

InFront Staffing's Responsibilities:

- Report all injuries to insurer within 24 hours
- > Actively participate and cooperate with the Injury Management Plan
- > Refer employee to preferred treating doctor as previously used by other employees
- Return an injured employee to work as soon as possible (subject to medical opinion)
- > Provide suitable duties if employee is partially incapacitated unless it is not reasonably practicable to do so
- Establish a return to work program for the rehabilitation of injured employees in association with our insurer
- Our preferred rehabilitation providers are Procare and Pinnacle Rehab.

Treating Doctor's Responsibilities:

- Provide Workcover certificates
- > Actively assist employee to safely return to work
- > Cooperate with the development and review of the Injury Management Plan

All candidates have read and signed off that they understand Injury Management Plan.



Injury Management Plan

Employee's Details	
Surname:	Given Name:
Phone #:	Date of Injury:
Injury Details:	·

Company Site Details (where injury has taken place)	
Company:	Phone #:
Contact Name/Position:	Direct Phone#:

Treating Doctor's Details	
Name: Dr.	Phone #:

Other Treatment Providers/Rehabilitation Details	
Name:	Phone #:

Medical & Treatment Plan		
Service/Action	Person Responsible	Review Date



Return to Work Planning		
Are suitable duties available: 🛛 Yes	🗆 No	
Service/Action	Person Responsible	Review Date

Return to Work Planning – I	Infront contact with injured w	vorker / Insurance
Are suitable duties available	e: 🗆 Yes 🛛 No	
Contact made with	Person Responsible	Discussion points

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