



Impairment Assessor Accreditation Scheme Review

Dear Stakeholder

I am pleased to provide an update regarding the review of the Impairment Assessor Accreditation Scheme (IAAS).

We have recently completed the comprehensive review of the IAAS and Performance Monitoring Framework (PMF). The aim was to establish a renewed IAAS and PMF that enhances the objectivity, fairness, and consistency of Whole Person Impairment (WPI) assessments under the Return to Work scheme. The Minister for Industrial Relations and Public Sector (Minister) has now approved the proposed IAAS which can be found [here](#). The IAAS will come into effect on 1 July 2025.

Consultation Background

During the initial phase of the IAAS review during August and September 2023, we gathered feedback from a range of stakeholders, including Permanent Impairment Assessors (Assessors), medical associations, claims agents, employer groups, and unions. This feedback was gathered through various channels, such as a forum and meetings, resulting in significant input, and this was in addition to eight written submissions. Consensus emphasised the need for reform of the existing IAAS, with key themes including accreditation continuance, ongoing training, a supportive approach to Assessor development, and the implementation of an Assessor peer support program.

All feedback was reviewed and considered to form a first draft of the IAAS which was combined with features consistent with the aim of the review. The PMF was incorporated into the IAAS resulting in a single document. Through April and May 2024 views were again sought from stakeholders on the first draft. There were 21 written submissions received and considered, resulting in further changes to the first draft IAAS.

A second draft of the IAAS was made available for a final round of feedback through October and November 2024 resulting in 18 written submissions and further changes to the IAAS being incorporated. Key themes and resulting changes, as approved by the Minister, are summarised below.

Active Clinical Practice

The introduction of an active clinical practice component for new Assessors seeking accreditation for upper limb, lower limb, spine, ENT and hearing was intended to extend the currency of medical practice beyond the levels required by the Australian Health Practitioner Regulation Agency (AHPRA) with an intention to lift the overall the

quality of the assessments provided to the Return to Work scheme. Some stakeholders expressed concerns around this requirement resulting in some Assessors being unable to maintain their existing accreditation and exacerbating gaps in some body systems. There was limited feedback recommending a relaxation of this requirement. After consideration, requirements were reduced from eight to an average of six hours per week and clinical teaching added to satisfy accreditation requirements. The restriction is only mandatory for systems where there are currently sufficient Assessors to meet IAAS requirements and given no Assessors who are currently accredited will lose their accreditation or have this as a new requirement, there will be no impact upon worker choice or Assessor availability.

Assessor Residency

We noted similar concerns with the feedback provided in relation to the introduction of the residency requirement for new Assessors for the body systems described above. Although it is not anticipated that this requirement would have an impact upon Assessor availability, given the proposed impacted body systems are well represented, the removal of this requirement is maintained.

Impairment Assessment Report templates

Following the consideration of feedback received from the final round of consultation, section 3.4.5 continues to mandate that Assessors use the relevant ReturnToWorkSA Impairment Assessment Report template, but now this requirement includes self-insured employers. This change will have positive implications for overall consistency and clarity of requirements for Assessors and Requestors and therefore workers receiving their correct entitlements.

Previous treatment

Section 3.4.13 relating to the previous treatment or assessment exclusion is an existing feature of the current IAAS and is designed to maintain the impartiality and integrity of the WPI process beyond that provided by AHPRA requirements. This section has been retained and following feedback from the final round of consultation has reverted to the original IAAS which states '*Assessors must not provide, or have provided, any form of treatment, advice or assessment in relation to the worker unless otherwise agreed with the Requestor – in some circumstances there may not be an alternative Assessor available to undertake the assessment*'. Some stakeholders expressed that this requirement impacts the number of available assessors and could result in blockages and delays. At the time of writing there are 111 accredited assessors with the most serviced body systems well represented by Assessors. ReturnToWorkSA maintains that there may be exceptional circumstances which can be agreed with the Requestor.

Assessor Performance

Some stakeholders requested that information relating to Assessor performance, remedial actions and/or suspension be made available publicly for injured workers and employers. Performance issues can be complex with multiple contributing factors and differing perspectives. If this information was to be made public, it may impede the opportunity for a collaborative and constructive resolution of an issue, as well as negatively impact on the appeal of undertaking assessments for existing and potential Assessors. If an Assessor's accreditation is

suspended or cancelled, they will be removed from the [public list of available assessors](#) available on the ReturnToWorkSA website, which maintains a sufficient and appropriate level of protection for injured workers.

Face to Face Assessments

Some stakeholders requested more detail relating to exceptional circumstances which would warrant exemption from undertaking an assessment in person (section 3.4.3) and submitting/receiving assessment information via the online portal (section 3.4.6). Given each circumstance is different and there may be a variety of factors at play, it is challenging to summarise exemptions which will cover all or most circumstances. These sections have been retained as described and each situation will be assessed upon its merits.

Peer Support Program

There was consistent and widespread support from Assessors for the proposed Peer Support Program which will provide support for Assessors in relation to issues or questions of a medical nature. The primary concerns raised regarding this proposed Program were related to transparency, particularly to issues or queries connected to a specific injured worker. Section 4.1.5 (which is repeated as section 4.3.4 within section 4.3: Technical Compliance Review) emphasises and highlights the important requirements around information sharing relating to an injured worker's assessment. Following concerns raised in the final round of consultation, additional clarity has been provided in relation to the Technical Compliance Review process which is in the spirit of multilateral communication and transparency. Section 4.3.1 now has additional detail verifying *'The worker or their representative will be provided a copy of the matters requiring clarification prior to the request being sent to the Assessor, allowing them the opportunity to contribute to the process and raise any additional matters'*.

General Practitioner Accreditation

The introduction of a restriction for General Practitioners seeking accreditation generated feedback from some stakeholders expressing that General Practitioners have sufficient knowledge and expertise in which to undertake WPI assessments. This change has been retained and is intended to further enhance the quality of the reports and emphasise the critical importance of the specialised medical aspect of the assessment of which it is considered that a specialist in a specific body system can provide.

ReturnToWorkSA wishes to acknowledge and thank you for your contribution to the review and development of the revised Impairment Assessor Accreditation Scheme.

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