

IMPAIRMENT INSIDER

Returnto
WorkSA

ISSUE 16
DECEMBER 2025

Introduction

Welcome to Issue 16 of the Impairment Insider.

As another year draws to a close, I'd like to take this opportunity to reflect on the past six months, which have been marked by two major milestones: the commencement of the Third Edition of the Impairment Assessment Guidelines (the Guidelines) and the revised Impairment Assessor Accreditation Scheme (IAAS).

Since the last issue, the IAAS was formally launched by the Minister for Industrial Relations and Public Sector, The Hon. Kyam Maher and a comprehensive training program delivered to support the implementation of the Guidelines. Five face-to-face sessions were delivered, complementing the online modules, FAQs and resources developed to assist Assessors in understanding and applying the new Guidelines.

As always, thank you for your continued engagement throughout the year. Wishing you a Merry Christmas and Happy New Year.

Jodie Yorke

Manager, Provider Programs



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Impairment Assessment Guidelines - implementation update

The Third Edition of the Impairment Assessment Guidelines commenced on 1 October 2025 and are now formally referred to as 'The Guidelines'.

To maintain accreditation beyond 1 October, assessors are required to successfully complete the required online training modules and pass the competency requirements. Assessors who do not meet these requirements are not currently accredited and will not appear on the **Public Listing of Whole Person Impairment Assessors**. To reinstate accreditation, please contact Simon Hynes, Impairment and IME Program Specialist on simon.hynes@rtwsa.com or 0448 511 774.



Training and resources

Thanks to those that attended the face-to-face and online sessions delivered as part of the extensive training program delivered by ReturnToWorkSA. Recordings of the sessions, presentation slides, Frequently Asked Questions and general resources can be accessed here - [IAG3 Change Resources](#).

We received some great and constructive feedback and really enjoyed delivering the sessions. It's always rewarding to hear that they were well received. That said, we're always looking for ways to improve and would appreciate any additional feedback you could provide, as well as any suggestions on future sessions that would be of interest. Please take a couple of minutes to share your thoughts [via this survey](#). Your responses will remain anonymous.



GEPIC session with Dr Michael Epstein

On 17 October 2025, ReturnToWorkSA, in partnership with the Motor Accident Injury Accreditation Scheme (MAIAS), hosted *The Guide to the Evaluation of Psychiatric Impairment (GEPIC)*, presented by Dr Michael Epstein, co-author of the GEPIC.

Thank you to all accredited psychiatrists who attended. The session was rich in insights and sparked plenty of valuable discussion.

The presentation is now available on the [IAG3 Change Resources](#) page. The session recording and a Frequently Asked Questions (FAQ) document will be added soon.



Stability and diagnosis - the importance of rationale

A whole person impairment assessment report is required to be clear, comprehensive, accurate and fair, and must provide detailed reasoning to support the assessment provided. The assessor is required to consider all available information along with their own observations and examination findings to arrive at an impairment assessment consistent with the methodology of the Guidelines.

1.54 of the Guidelines outlines the essential components of a whole person impairment report, placing particular emphasis on the need for clear reasoning behind clinical decisions. A well-reasoned rationale translates clinical judgement into a clear, evidence-based assessment and supports assessments that are fair, objective and consistent. The rationale is important for several reasons:

- it allows all parties to understand how the assessment was reached
- it ensures that assessments are evidence-based and aligned with the Guidelines
- it supports compliance with the requirements of the *Return to Work Act 2014* and the Guidelines

The report should clearly address current clinical status and diagnosis, the basis and evidence used for determining the diagnosis, and whether the injury/ies has/have stabilised. These elements are essential because they determine whether an impairment can be assessed.

Providing a clinical diagnosis is a complex activity requiring clinical reasoning based on the worker's symptoms, clinical signs and the investigations provided to you. If reports or investigations are relied on in arriving at an opinion, these must be referenced in the report.

A work injury can be considered to have stabilised if the condition is unlikely to change substantially in the next 12 months with or without medical treatment (regardless of any temporary fluctuations in the condition that might occur).

The *Return to Work Act 2014* provides for exceptions to the requirement for an injury to have stabilised, such as in the case of prescribed conditions (such as dust/fibre diseases) and terminal conditions. The Guidelines also provide specific timeframe requirements before stability can be considered to have been reached for a number of conditions such as such as complex regional pain syndrome (CRPS), peripheral nerve impairments and brain injuries.

Assessment of voice/speech - ENT

AMA5 defines speech as ‘*the capacity to produce vocal signals that can be heard, understood, and sustained over a useful period of time*’.

In providing assessments for the voice/speech, it is essential that clear and detailed rationale is provided. 1.54 of the Guidelines directs that reasoning must be provided as to how the assessor decided to allocate an injury to a particular class and selected a percentage with the available range for that class. In addition, the preamble to the ENT chapter 6 in the Guidelines directs ‘...*the impairment assessment report should set out the reasoning for the assessment of the work-related impairment and the relationship of the rating to the injury. Where method selection occurs, this should be reasoned, including a description provided in terms of the method and its relationship to the injury*’.

11.4d of AMA5 provides the method for assessment of the voice/speech. Assessors are directed to base judgements of impairment on two kinds of evidence:

- (i) attention to and observation of the individual’s speech in the office
- (ii) reports pertaining to the individual’s performance in everyday living situations.

In the assessment on the day of examination, Assessors are directed to: -

1. Place the individual approximately 8 feet away
2. Interview the individual to allow observation of speech in ordinary conversation.
3. Request that the individual read aloud the paragraph “The Smith House” with their back to the assessor.
4. Assessors should record judgement of the individual’s speech capacity with regard to audibility, intelligibility, and functional efficiency with reference to Table 11-8 of AMA5 providing detailed reasoning for their choice of class and value within the class for each criteria in accord with the requirements of 1.54 and the preamble to the ENT chapter of the Guidelines.
5. The greatest percentage of impairment assessed in any of the three criteria is then chosen as the impairment value for speech and applied to Table 11-9 to convert to WPI%.

Assessors should ensure the assessment provides sufficient rationale to support the assessment in relation to criteria such as sound intensity, strength, pitch, hoarseness, breathiness and voice fatigue.



Identifying additional impairments not requested for assessment

There may be occasions where an impairment assessor identifies additional impairments that were not requested to be assessed.

1.20 of the Guidelines provides direction on what to do in this instance. The assessor must make reasonable efforts to contact the requestor to advise of the newly identified impairment and to ascertain if the assessment should proceed or be deferred to a later date.

In the event that the assessor is unable to contact the requestor, the assessor must describe the history of the onset of the newly identified condition or injury in the report, but must not proceed with the %WPI calculation for any work injury until they have advice from the requestor about the approach to be taken.

The assessment is to be deferred, with the assessor explaining the situation to the worker and providing a report to the requestor outlining the reason for deferral.

It is important that the assessor does not proceed to provide impairment ratings for either the work injury/ies requested for assessment, or the newly identified impairment, unless instructed to do so by the requestor.



Changes to the assessment of skin

Several changes have been made to the assessment of skin in the Guidelines. Assessors should be particularly aware of the wording in clause 13.4 which directs the assessor to review the body part (or parts) relating to the work injury only and assess the scarring to those body parts alone. Therefore any scarring to other body parts unrelated to the work injury are ignored in the assessment. This is a significant change from previous Guideline requirements.

Where the subject work injury includes multiple scars to be assessed all arising from the same injury or cause, these are still required to be assessed together as one impairment rather than assessing each scar individually. In addition, Assessors are still required to consider any pre-existing or unrelated scarring, providing they relate to the same body part(s) as the work injury, and provide an assessment to be deducted for the prior scarring as pre-existing impairment. It remains important to ensure that descriptions are provided of all scarring being considered, and the principles of best fit utilising the TEMSKI table are applied, with detailed reasoning to support your assessment.

Further detail on the changes made to the assessment of skin, including working examples, can be found in the [IAG3 Change Resources](#). It is recommended that Assessors make themselves familiar with these resources.



Impairment Assessment report templates

With the commencement of the Third Edition of the Guidelines, it is important to ensure you are using the most up-to-date report template. This will ensure that any significant changes, such as those relating to stability, are accurately reflected in your report.

Updated versions of the templates are available on the [ReturnToWorkSA website](#).

During this transition period, it is important to review the Declaration to confirm which edition of the Guidelines have been applied in your assessment.



Enhance your assessments with peer support

ReturnToWorkSA, in partnership with SAPMEA, offers the Peer Support Program, part of quality management under the Minister's approved Impairment Assessor Accreditation Scheme (IAAS). The program is designed to help assessors deliver assessments that are consistent, objective, and fair.

Working with a Peer Support assessor allows you to:

- Maintain consistency and fairness in your assessments
- Strengthen medical reasoning for clear, well-justified reports
- Stay compliant with guidelines, the Act and AMA guides.

Consulting a Peer Support assessor is a practical way to enhance your professional growth while upholding the highest standards of assessment.

How to connect

Click [here](#) to select your Peer Support assessor.

For further enquiries please contact SAPMEA at psp@sapmea.asn.au or call (08) 8239 0786



Motor Accident Injury Accreditation Scheme (MAIAS) update

The MAIAS Administrator is pleased to announce commencement of the 2025–2028 accreditation cycle.

What is the MAIAS?

In South Australia's Compulsory Third Party Insurance Scheme, an injured road user may be entitled to compensation for their injuries. Some types of compensation are subject to a threshold based on the Injury Scale Value (ISV) of the injuries. The MAIAS accredits medical practitioners to undertake ISV medical assessments that assist in determining an injured person's entitlement to compensation.

Accreditation with MAIAS is open to accredited impairment assessors.

New applicants

If you are an accredited impairment assessor under the Return to Work scheme and wish to pursue accreditation as a MAIAS Accredited Medical Practitioner (AMP), please complete the [MAIAS application form](#), email it to maias@sa.gov.au.

Existing MAIAS AMPs

To maintain accreditation as an AMP and continue to be able to perform ISV medical assessments, it is a requirement to successfully complete your accreditation renewal requirements by 31 January 2026.

If you are an AMP and have not recently received correspondence from the MAIAS Administrator about the new accreditation cycle, please contact Parth Sharma, Injury Services Officer, using maias@sa.gov.au or 0450 745 355.

Learn more

To learn more about MAIAS, please visit the following links:

- [About MAIAS](#)
- [Injury Scale Value Medical Assessments](#)
- [MAIAS Scheme Rules](#)

For any questions, please contact Parth Sharma, Injury Services Officer - maias@sa.gov.au or 0450 745 355.



Online Services Portal

Permanent Impairment Assessors are required to use ReturnToWorkSA's Online Services portal to receive and submit impairment assessment documents securely and efficiently.

Submitting documents via Online Services offers several advantages over email:

1. Efficient delivery: Documents are automatically directed to the appropriate recipient
2. Invoice upload: Invoices can be submitted alongside reports, streamlining administrative tasks
3. Elevated security: Online Services uses advanced security protocols that surpass traditional email protections, helping safeguard confidential information through secure transmission of sensitive worker information
4. Improved file handling: Large files can be submitted without impacting email inbox limits

Document upload tips

Where possible, attachments (excluding invoices) should be combined and uploaded as a single document. This may include photographs, worksheets or audiograms.

Notification preferences

As referral documents are sent via Online Services, it's important to ensure notification preferences are correctly configured. Once established, an email alert will be sent when referral documents are available. These can be accessed via the email link or directly through the online services portal.

Support and resources

ReturnToWorkSA has developed a [Guide for Medico-legal Providers](#) using Online Services, which outlines how to use Online Services.

If you would like further information or to book a personalised training session, please contact wpi@rtwsa.com or call 8238 5960.

If you are experiencing login issues, please email prov.main@rtwsa.com



New applications

We are currently accepting applications for these body systems:

- Haematology
- Endocrinology
- Ophthalmology
- Cardiovascular
- Gastroenterology
- Urology
- Respiratory
- ENT / Hearing Loss

If you have any colleagues interested in applying to become an Accredited Permanent Impairment Assessor in the Accreditation Scheme, please ask them to contact Scott on **(08) 8233 2112** or wpi@rtwsa.com for further discussion.



Did you know you can access previous editions of this newsletter?

Have a question about how to manage a particular assessment? Try looking through some previous editions of the Impairment Assessor Insider in case we have clarified it earlier.

The **Impairment Assessor news and resources page** on the ReturnToWorkSA website contains all recent editions, as well as notices, templates and other resources.

If you wish to access past versions, or have an idea for an article or resource, please contact the Impairment Assessment Services team on **(08) 8238 5960** or wpi@rtwsa.com



Update your Assessor listing

To ensure our **public listings** are current, please notify us if your details require updating.

This may include changes to your address, practice details, COVID-19 vaccination requirements or an update to your referral requirements.

We also publish information about areas of special clinical interest, spoken languages and consultation in rural and remote areas.

Please email us at wpi@rtwsa.com or call our Impairment hotline on **(08) 8238 5960**.

A requirement of your accreditation is to maintain adequate insurance cover. If you have renewed this recently, please provide us with a copy of your certificate of public liability and professional indemnity insurance.



Questions, concerns or content suggestions

The whole person impairment process is extensive, complex and prone to change, in light of significant legal decisions. We aim to make these newsletters engaging and relevant to current topics.

If you have any queries, concerns or content suggestions email us at wpi@rtwsa.com or phone our Impairment hotline on **(08) 8238 5960**.



Preferred communication method

To ensure that you are receiving all relevant information, please advise ReturnToWorkSA of any changes to your preferred private method of communication.

If you have changed your private communication preference, please contact **wpi@rtwsa.com** with your preferred private method of communication (eg. email or phone preferences).



DID YOU KNOW?

Where ReturnToWorkSA requires clarification before your report can be marked as compliant, this is not considered a supplementary report.

Corrections and amendments to a report after initial submission are covered in the agreed PIA fee and do not attract an additional fee.

Supplementary fees apply where a request for further opinion after the fact has been made by the requestor.