



RETURN TO WORK SCHEME

Impairment Assessor Accreditation Scheme



Government of
South Australia



IMPAIRMENT ASSESSOR ACCREDITATION SCHEME

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GLOSSARY

Assessor	a medical practitioner who holds a current accreditation issued by the Minister in accordance with section 22(17) of the <i>Return to Work Act 2014</i>
Act	the <i>Return to Work Act 2014</i>
Minister's Advisory Committee	a Committee established in Part 11 of the Act
AHPRA	the Australian Health Practitioner Regulation Agency
Assessment	a Whole Person Impairment Assessment
Compensating Authority	ReturnToWorkSA or a self-insured employer, depending upon which entity has paid, or is liable to pay compensation under the Act
CRPS	Complex Regional Pain Syndrome
GEPIC	<i>Guide to the Evaluation of Psychiatric Impairments for Clinicians</i>
Guidelines	the <i>Impairment Assessment Guidelines</i> published under section 22(3) of the Act (or the <i>WorkCover Guidelines for the Evaluation of Permanent Impairment</i> , where required)
Immediate Family Member	a spouse or former spouse, de facto partner or former de facto partner, child, parent, grandparent, grandchild or sibling of an employee, or a child, parent, grandparent, grandchild or sibling of an employee's spouse or de facto partner. It includes step-relations (e.g. step-parents and step-children) as well as adoptive relations
Impairment Assessment Advisor	performs a technical compliance review of the Impairment Assessment Report, to ensure consistent application of, and compliance with, the Act and the Guidelines, relevant American Medical Association Guides and relevant case law
Impairment Assessment Report	a report prepared by an Assessor in accordance with the <i>Impairment Assessment Guidelines</i>

The Minister	the Minister to whom the Act is committed under section 5 of the <i>Administrative Arrangements Act 1994</i>
Requestor	the requestor of the Assessment, which can include ReturnToWorkSA, the claims agent, the South Australian Employment Tribunal or self-insured employer
ReturnToWorkSA	the statutory authority established to provide work injury insurance and regulating the South Australian Return to Work scheme
RPL	recognition of prior learning
RTW scheme	Return to Work scheme
Service Standards	Standards as detailed under schedule 5 of the Act
Service Requirements	expectations as described within the <i>Impairment Assessor Accreditation Scheme (IAAS)</i>
Scheme	RTW scheme's <i>Impairment Assessor Accreditation Scheme</i>
Staff	all the people employed by a particular organisation
Technical Compliance Review	review of the Impairment Assessment Report, to ensure consistent application of, and compliance with, the Act and the Guidelines, relevant American Medical Association Guides and relevant case law

IMPAIRMENT ASSESSOR ACCREDITATION SCHEME

Purpose

The purpose of the *Impairment Assessor Accreditation Scheme* (IAAS) is to establish the regulatory and service standards Assessors are required to meet to be accredited and maintain accreditation under the IAAS.

The Assessment is an important aspect of the RTW scheme. Through the setting of standards and requirements for Assessors, the IAAS assists in the completion of objective, fair, consistent, and quality Assessments arising from a work injury.

Introduction

Section 22 of the *Return to Work Act 2014* (the Act) sets out the rules for assessing permanent impairment and also requires the establishment of an IAAS to govern the appointment and management of suitably qualified medical practitioners to undertake Assessments of permanent impairment.

Under section 22(16) of the Act, the Minister must establish an IAAS for the purposes of the Assessment. Once established, the Minister will review the IAAS at intervals of no more than 5 years.

An accreditation will be issued on terms and conditions determined by the Minister and outlined in this document. An Assessment must be made by a medical practitioner who holds a current accreditation issued by the Minister.

Based on their degree of impairment, a worker with permanent impairment that has arisen from a work injury, may be entitled to receive statutory lump sum payment and/or serious injury support.

Assessors will be required to annually declare their compliance with the accreditation requirements.

The Assessment process commences when the worker agrees to commence the process, and is completed when the Compensating Authority, the Tribunal or a court makes one or more determinations based on the Impairment Assessment Report or reports. It includes the consultation around the selection of an Assessor, consultation on the request letter, the examination appointment or appointments, the Impairment Assessment Report, and the technical compliance review.

Communication

There is a need for effective communication between all parties concerned with an Assessment, to enable the fair, efficient and timely undertaking of assessments. To achieve that aim, it is desirable that communication be:

- (a) clear by using plain and simple language and, in the case of communication with an injured worker, in language appropriate to the worker; and
- (b) accessible by being both written and, in the case of communication with a worker, be explained. That explanation should be offered without the need for a request from the injured worker; and
- (c) timely, so that communication with both the injured worker and the Assessor is prompt and relevant to the next step in the assessment process. All relevant documents and information are to be provided to the Assessor to allow for sufficient preparation before the examination (as a guide, these documents and information should be provided 20 business days before the examination). Where clarification is required, that should be sought, addressed and responded to promptly (as a guide, within 10 business days) to enable the completion of an Assessment; and
- (d) transparent, so that all parties concerned with the Assessment have an opportunity to contribute information to the Assessment. The parties should also have access to the information contributed by the other parties and are entitled to the written correspondence between the other parties, contemporaneously with it being sent; and
- (e) respectful and polite.

An Assessor may provide information in advance and, to the extent necessary at the Assessment, should explain to an injured worker:

- (a) who the Assessor is, and their role in the Assessment; and
- (b) the injured worker's role in the Assessment including their need to contribute information to the Assessment; and
- (c) how the Assessment will proceed – in terms specific to the impairment being assessed; and
- (d) the need for any physical examination that may be undertaken by the Assessor such as any physical manipulation to measure range of movement.

An Assessor should not provide any opinion to the worker about the outcome of the Assessment, or their work injury claim.

1 CRITERIA FOR ACCREDITATION

Under section 22(17)(b) of the Act, the Minister issues the accreditation to medical practitioners authorised to undertake Assessments for the purposes of the RTW scheme.

To be considered for accreditation by the Minister, an applicant must:

- 1.1 be a medical practitioner registered with the Medical Board of Australia (under AHPRA);
- 1.2 have at least 5 years post-graduate experience in one of the specialties listed in the Guide for Systems and Specialties (1.12, refer to page 26);
- 1.3 have no current notations, undertakings, reprimands or relevant conditions recorded against their registration for medical practice;
- 1.4 have completed the relevant American Medical Association (AMA) Guides training specific to body systems specified pursuant to the Training Criteria Table (3.1.9 refer to page 13);
- 1.5 satisfactorily complete the online training required for accreditation;
- 1.6 declare any real, perceived or potential conflict of interest as a result of becoming an Assessor to the Scheme. In assessing whether a real, perceived or potential conflict of interest exists, the Assessor must consider:
 - any personal, professional or pecuniary gain or benefit being received;
 - any existing personal relationships;
 - businesses which the Assessor, their immediate family or their staff has an interest in;
 - any financial or other personal interest that could, or could be perceived to, influence the Assessor in the performance of the services; or
 - any other relevant matter.

An example of a potential conflict would be where an Assessor has a financial interest in a business that sells hip prostheses commonly used within the RTW scheme and is seeking accreditation for Lower Limb Assessments.

A declaration made by the applicant will be considered when determining eligibility for accreditation.

- 1.7 have access to sufficient resources and infrastructure to undertake all administrative and quality assurance activities necessary to successfully and fully undertake the role of an Assessor, e.g. e-mail and internet access;

- 1.8 be in active clinical practice if assessing body systems specified on the Criteria Table (1.11) below. Active clinical practice is defined as either:
- a) treating/providing medical care to patients AND/OR
 - b) active clinical teaching of medical students, interns, residents, registrars and other medical and allied staff through teaching hospitals or equivalent; and
- for at least 6 hours per week, or over 288 hours total in 1 calendar year.

The applicant must also provide evidence to ReturnToWorkSA that they:

- 1.9 have relevant specialist qualifications and experience. See Guide for Systems and Specialties (1.12, refer to page 26).
- 1.10 hold current medical indemnity insurance of at least AU\$5 million and public liability insurance of at least AU\$10 million.

Assessors must continue to meet these Criteria for Accreditation throughout the currency of their accreditation.

In determining the eligibility of applicants, the Minister may also have regard to the requirements of the RTW scheme, the estimated number of Assessments likely to be done each year in each body system and, where relevant, the applicant's prior performance.

1.11 Criteria Table

Criteria	Body Systems – Mandatory	Body Systems – Recommended (Non-Mandatory)
Active Clinical Practice (Criteria 1.8)	Upper Extremity, Lower Extremity, Spine, ENT, Hearing	Nervous System, Urinary and Reproductive, Respiratory, Visual, Haematopoietic, Endocrine, Skin, Cardiovascular, Digestive, Psychiatric

1.12 Guide for Systems and Specialties – refer to page 26.

2 APPLICATION PROCESS

The application process is a 6-step process:

- 2.1 Application** – Complete the application form including which body system(s) for accreditation, and submit the application form to wpi@rtwsa.com with evidence of:
 - AHRPA registration;
 - qualifications;
 - professional indemnity insurance;
 - public liability insurance;
 - current relevant clinical practice in selected body system(s);
 - AMA5, AMA4 training (for visual system) or GEPIC(Psychiatric); and
 - previous training (if relevant).
- 2.2 Confirmation** – Applicants are to confirm that they have read, understood and agreed to comply with the *Impairment Assessor Accreditation Scheme* and that they have completed the mandatory IAAS online module.
- 2.3 Eligibility** – Applications will be considered against the eligibility criteria set out in the Criteria Table (1.11, refer to page 9) and Guide for Systems and Specialties (1.12, refer to page 26). Only applications that are assessed as meeting the eligibility criteria will be provided to the Minister for consideration for accreditation.
- 2.4 Approval** – The applicant approved for accreditation will be advised of their specific training requirements.
- 2.5 Training** – The applicant undertakes the required training and competency testing for their approved body system(s), within a reasonable timeframe, as detailed in the document.
- 2.6 Finalise** – Upon successful completion of the above, the applicant receives confirmation of accreditation and their details are published on the [Whole Person Impairment Assessor List](#).

3 ACCREDITATION REQUIREMENTS

3.1 Initial Training

- 3.1.1 The methodology in the Guidelines is largely based on the *American Medical Association's Guides to the Evaluation of Permanent Impairment, Fifth Edition* (AMA5), with the exception of the Visual system which is based upon *American Medical Association's Guides to the Evaluation of Permanent Impairment, Fourth Edition* (AMA4), and Psychiatric body systems which is based upon GEPIC. For this reason, it is a requirement that all applicants complete training as specified in the Criteria Table (3.1.9, refer to page 13).
- 3.1.2 In order to be eligible for accreditation, the applicant must have completed the required training and successfully pass the competency assessment required for each relevant body system(s) module within a reasonable period of time, as well as any amendment or substitution in relation to the Guidelines prior to their implementation.
- 3.1.3 RPL may be considered where the training completed is relevant and comparable (i.e. for a Scheme using similar guidelines) and has been undertaken in the previous 5 years. Competency assessment may still be required.
- 3.1.4 Applicants who have requested RPL for training must successfully complete training in the compulsory introductory 'Impairment Assessor Training Introduction' and the 'Impairment Assessment Guidelines Core Module', as they contain information specific to the Guidelines and the RTW scheme. This and any other training deemed relevant and necessary should be completed within a reasonable period of time.
- 3.1.5 Assessors who are accredited immediately before the Minister's approval of the new IAAS will maintain their existing accreditation in their designated body system(s), and all will transition to the new IAAS, although 3.1.2 will still apply.
- 3.1.6 For the Mandatory requirements of the AMA5 Training Criteria Table (3.1.9, refer to page 13), Assessors who hold a current accreditation under the Scheme will be provided 1 year to complete this training to maintain their accreditation.
- 3.1.7 Following accreditation in either the Upper Limb or Lower Limb, Assessors who wish to assess CRPS will be required to complete training in CRPS as provided by ReturnToWorkSA.
- 3.1.8 For accreditation in Psychiatric Disorders, Assessors will be required to undertake training in the GEPIC.

3.1.9 AMA5 Training Criteria Table

Criteria	Body Systems – Mandatory	Body Systems – Recommended (Non-Mandatory)
Completed AMA5 Training (Criteria for Accreditation 1.4)	Upper Extremity, Lower Extremity, Spine	Nervous System, Urinary and Reproductive, Respiratory, Haematopoietic, Endocrine, Skin, Skin (Temski), Cardiovascular, Digestive, Digestive (hernia), Hearing , ENT, Visual (AMA4 Chapter 8).

3.2 Accreditation Period

Accreditations will be issued by the Minister for a period of 5 years, subject to compliance with this Scheme.

3.3 Ongoing Training

- 3.3.1 Assessors must complete the online modules and associated assessments specific to their accredited body system(s) every 2 years to maintain their accreditation.
- 3.3.2 Assessors must complete any training and/or competency assessment following identification of ongoing Impairment Assessment Report compliance or quality issues within 6 weeks of notification by ReturnToWorkSA.
- 3.3.3 Assessors must complete the required training related to amendment or substitution of the Guidelines prior to the implementation of the amended or substituted Guidelines.
- 3.3.4 Assessors must be able to demonstrate that they have attended at least two relevant training activities provided by ReturnToWorkSA annually. These could include, but are not restricted to, attendance at forums, training sessions, group sessions or 1:1 peer sessions. If unable to attend in person, virtual attendance and/or viewing a recording of the session counts toward this requirement.

3.4 Terms and Conditions of Accreditation

In order to maintain accreditation in this Scheme, an Assessor must comply with each of the following terms and conditions of accreditation.

- 3.4.1 Assessors must adhere to the Terms and Conditions, Service Requirements, Training, Ongoing Accreditation and Quality Management requirements as stated in this document and Service Standards ([Our service commitments \(rtwsa.com\)](https://www.rtwsa.com)) on an ongoing basis, and advise ReturnToWorkSA within 10 business days if unable to do so.
- 3.4.2 Assessors must continue to meet the Criteria for Accreditation and advise ReturnToWorkSA within 7 business days if they no longer meet any one or more of the eligibility criteria.
- 3.4.3 Assessors must only conduct Assessments in person. Assessments via telephone or an online platform (e.g. Zoom or Microsoft Teams) can only be carried out if there is a good reason to do so, as approved by the Requestor.
- 3.4.4 The Impairment Assessment Report prepared by an Assessor must contain information based on the Assessor's own history taking and clinical examination.

- 3.4.5 Assessors must provide Assessments and Impairment Assessment Reports in accordance with the Guidelines, the Act and using the relevant ReturnToWorkSA mandatory Impairment Assessment Report template.
- 3.4.6 Assessors must utilise ReturnToWorkSA's online services portal to receive Impairment Assessment Report requests and submit completed Assessments unless otherwise agreed with the Requestor. (Note: this is not applicable for workers with claims managed by self-insured employers.)
- 3.4.7 Assessors must ensure that services are provided and invoiced in accordance with the current *Permanent Impairment Assessment Services Medical Fee Schedule and Policy*.
- 3.4.8 Assessors must provide Assessments without bias and in a way that does not give rise to any apprehension of bias in the performance of their responsibilities.
- 3.4.9 Assessors must declare any real, perceived or potential conflict of interest to the Requestor as soon as they are aware. In assessing whether an actual or potential conflict of interest exists, the Assessor must consider:
- any personal, professional or pecuniary gain or benefit being received;
 - any existing personal relationships;
 - businesses in which the Assessor, their immediate family or their staff has an interest; and
 - any financial or other personal interest that could, or could be perceived to, influence the Assessor in the performance of the services.

The Requestor must consider the above declaration in determining if the Assessment should proceed with that Assessor.

- 3.4.10 Assessors must notify ReturnToWorkSA in writing within 7 business days if charged, found guilty or convicted, or fined for a criminal offence involving dishonesty or an offence punishable by a period of imprisonment.
- 3.4.11 Assessors must notify ReturnToWorkSA in writing within 7 business days if made aware they are currently being investigated by AHPRA or any formalised allegations of unethical conduct or professional misconduct or any alleged breaches of any applicable guidelines relating to the above.
- 3.4.12 Assessors must make themselves available to appear, if requested by the South Australian Employment Tribunal (SAET), at the requested date and time to provide evidence in relation to an Assessment.

- 3.4.13 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.

3.5 Service Requirements

The Assessor must comply with the Service Requirements of accreditation which are outlined below. The Assessor must:

- 3.5.1 operate consistently with the relevant standards set by each Assessor's professional body and the IAAS;
- 3.5.2 adhere to the Medical Board of Australia's Good Medical Practice: A Code of Conduct for Doctors in Australia: <https://www.medicalboard.gov.au/codes-guidelines-policies/code-of-conduct.aspx> ;
- 3.5.3 comply with the confidentiality requirements of the Act and, where applicable, the *Privacy Act 1988* (Cth) and any other law relevant to health records;
- 3.5.4 take reasonable steps to preserve the privacy and modesty of the worker during the Assessment;
- 3.5.5 must not offer any advice or comment to the worker about any legal matter, their rights or entitlements relating to their claim but must, consistent with Communication (b) page 7, explain the steps to be followed in the Assessment, including when and why an Assessment may need to be ceased;
- 3.5.6 use their discretion as to whether it is appropriate to notify the worker and/or the worker's treating medical practitioner directly by phone or letter about any incidental clinical finding during an Assessment of the worker;
- 3.5.7 use online technology as required to receive, access and distribute relevant information in relation to the Assessment e.g. online imaging portals, ReturnToWorkSA online services portal;
- 3.5.8 see the worker within 6 weeks of the appointment being requested, unless agreed and documented between the Requestor, worker and Assessor. If time frames are not available, Assessors should decline an Assessment so that another Assessor who is available and accredited can undertake the Assessment;
- 3.5.9 provide the Impairment Assessment Report within 10 business days of the Assessment being completed, or as agreed, and documented between the Requestor and the Assessor, which must be noted in the Impairment Assessment Report;

- 3.5.10 provide the Impairment Assessment Report in accordance with (as amended from time to time):
- a) Part 14, Division 4 – Content of expert report from the *Uniform Civil Rules 2020*, and
 - b) Part 14 – Rule 66 – Expert evidence from the *South Australian Employment Tribunal Rules 2022*;
- 3.5.11 provide up-to-date contact details to ReturnToWorkSA for the purpose of publication on the Whole Person Impairment Assessors List. Assessors must notify ReturnToWorkSA in writing within 10 business days of any change to name, contact details or accreditation status;
- 3.5.12 ensure that the location of the Assessment complies with the premises standards relevant to the Assessor’s college or association e.g. disability access, first aid etc.; and
- 3.5.13 refrain from offering any opinion on the worker’s medical or surgical management by other medical practitioners unless failing to do so would cause detriment to the worker’s health.

3.6 Declaration Requirements

An Assessor must complete the *Impairment Assessor Accreditation Declaration* (the Declaration) on or by the anniversary date of their accreditation approval notification from ReturnToWorkSA. Assessors must submit the Declaration to ReturnToWorkSA and attest to the following, remaining current over the previous 12 months:

- a) AHPRA registration currency;
- b) ongoing eligibility under the Criteria for Accreditation;
- c) no notations, undertakings, reprimands or relevant conditions recorded against their registration for medical practice in the previous 12 months;
- d) professional indemnity insurance maintained to the requisite level of AU\$5 million;
- e) public liability insurance maintained to the requisite level of AU\$10 million;
- f) ongoing training requirements, as set out in this document and otherwise prescribed by ReturnToWorkSA, have been met; and
- g) compliance with Peer Support Requirements as specified in the Quality Management (4) section.

Once the Declaration Requirements have been met to the satisfaction of the Minister, the Assessor will receive confirmation of their continuing accreditation. Their details will continue to be published on the Whole Person Impairment Assessors List.

4 QUALITY MANAGEMENT

ReturnToWorkSA is dedicated to supporting Assessors to deliver high quality Assessments that:

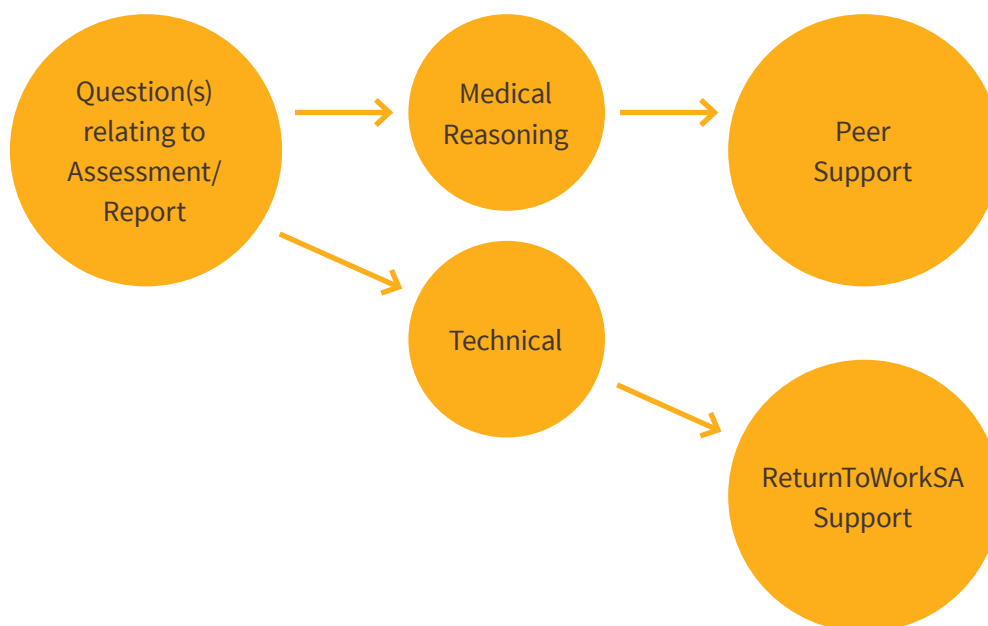
- are consistent, objective and fair;
- contain sound, clear and justified medical reasoning;
- comply with the *Impairment Assessment Guidelines*, the Act and the relevant AMA Guides;
- facilitate a positive experience for workers; and
- ensure the correct entitlements for injured workers are established.

Assessors will be supported throughout the various stages of the Assessment process based on their individual needs.

4.1 Pending Assessment Report Support

Support is available to Assessors for Impairment Assessment Report specific Assessment issues, concerns or questions that are related to Assessments prior to submission to the Requestor. See Support Model on page 19.

- 4.1.1 To the extent that an Assessor is required to disclose confidential information about a worker's medical condition to obtain Pending Assessment Report Support from a Peer Support Assessor, the Minister authorises this disclosure pursuant to section 185(3)(j) of the Act.
- 4.1.2 Any issues or questions relating to medical reasoning can be addressed through the Peer Support Program.
- 4.1.3 The Peer Support Assessor can discuss and provide guidance on issues related to medical consistency, reasoning or any other concerns.
- 4.1.4 If the Assessor encounters any issues or questions relating to technical issues that do not involve medical reasoning or relate to general requirements of the IAAS, the Assessor can contact an Impairment Assessment Advisor directly on (08) 8238 5960 or e-mail wpi@rtwsa.com.
- 4.1.5 Consistent with transparency and as stated in Communication (d) page 7, all parties should also have access to the information contributed by the other parties, and are entitled to access the written correspondence exchanged among the other parties.



4.2 General Assessment Support

This support is available to Assessors for general issues, concerns or questions, and is available for all Assessors as required.

For those Assessors who are unable to consistently achieve a compliance rating average of 80% at first review annually, support will be provided as described below.

Assessors must comply with the Quality Management Process and cooperate in a timely manner to reasonable requests, which includes participation and engagement with the Peer Support Program.

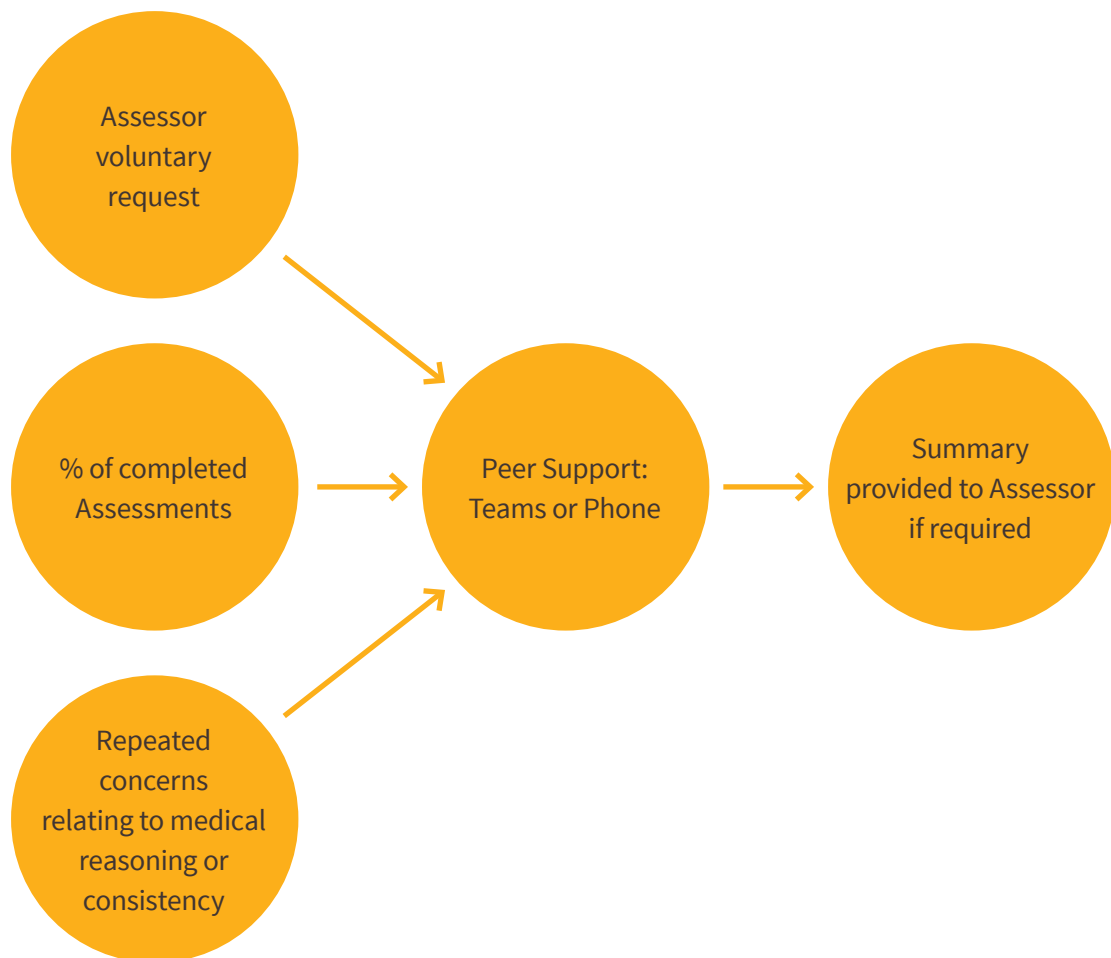
ReturnToWorkSA will:

- 4.2.1 monitor services provided by Assessors through Impairment Assessment Report reviews and performance data to ensure the appropriate delivery of Assessment services and service requirements are met.
- 4.2.2 obtain worker feedback.
- 4.2.3 provide Assessors with access to specific online reporting data including (but not restricted to):
 - compliance data relating to consistent application of the current *Impairment Assessment Guidelines*;
 - average timeframes relating to appointment date and Impairment Assessment Report submission; and
 - worker feedback.

- 4.2.4 facilitate a Peer Support Program to address issues relating to medical consistency and reasoning.
- 4.2.5 monitor and review Assessor eligibility for accreditation including compliance with ongoing accreditation requirements.
- 4.2.6 determine and make available additional ongoing training that Assessors may be required to undertake which may be at the Assessor's cost.

General Assessment Peer Support

- 4.2.7 Assessors are eligible for General Assessment Peer Support under any of the following circumstances:
 - a) voluntary request by the Assessor: This service is designed for Assessors who wish to discuss general matters relating to medical reasoning. No injured worker details should be shared with the Peer Support Assessor if General Peer Assessment Support is requested.
 - b) percentage of completed Assessments per year: This peer support is provided to Assessors commensurate with the number of Impairment Assessment Reports completed each year.
 - c) following repeated unresolved issues of non-compliance with the Impairment Assessment Guidelines potentially relating to medical issues identified by ReturnToWorkSA.
- 4.2.8 The Peer Support Assessor is a specialist accredited in the same body system as the Assessor. The Peer Support Assessor will discuss and provide guidance on medical consistency, reasoning or any other concerns. The Peer Support Assessor will contact the Assessor to provide feedback and discuss appropriate strategies, if required.
- 4.2.9 To the extent that confidential information about a worker's medical condition is required to be disclosed to a Peer Support Assessor in order for them to provide General Assessment Peer Support to an Assessor, the Minister authorises this disclosure pursuant to section 185(3)(j) of the Act.
- 4.2.10 Following peer support for 4.2.7 b and 4.2.7 c, the Peer Support Assessor provides the Assessor a summary of key strategies and recommendations the Assessor can consider in relation to future Assessments, which will also be provided to ReturnToWorkSA.



General ReturnToWorkSA Support

4.2.11 For support concerning matters that are not of a medical nature, ReturnToWorkSA will provide support and guidance to Assessors on a case-by-case basis which may include, but is not limited to:

- a) review and discussion of current accreditation requirements.
- b) a review of appropriate timeframes and strategies for Impairment Assessment Report submission.
- c) providing access to training sessions, forums or peer group sessions.
- d) further chapter specific online module and associated Assessment training and support.

4.3 Technical Compliance Review

- 4.3.1 ReturnToWorkSA or a self-insured employer (a Requestor) will undertake a technical compliance review of an Impairment Assessment Report issued by the Assessor, to ensure correct calculations, identification of any typographical errors, and the consistent application of and compliance with the Act and the Guidelines, relevant AMA Guides and relevant case law. The Assessor may be contacted for clarification relating to an Impairment Assessment Report or to discuss any possible issues relating to Assessments that are not finalised.

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.

- 4.3.2 Assessors should respond to clarification requests from a Requestor within 10 business days through ReturnToWorkSA's online services portal, or via e-mail if a self-insured employer, or otherwise agreed with the Requestor.
- 4.3.3 If a subsequent Impairment Assessment Report is provided following a clarification request, it must be marked as an 'amended report' to differentiate it from the initial report.
- 4.3.4 Consistent with transparency and as stated in Communication (d) page 7, all parties should also have access to the information contributed by the other parties and are entitled to access the written correspondence exchanged among the other parties.

4.4 ReturnToWorkSA Monitoring and Reporting

To ensure compliance with the IAAS, ReturnToWorkSA may record and report on the following information:

- 4.4.1 concerns or other feedback raised by workers, worker's representatives, claims agents, self-insurers, the SAET or other parties;
- 4.4.2 statistical information including but not limited to compliance with the Guidelines and requirements as specified in 3.5 (refer to page 16);
- 4.4.3 information from and relating to Impairment Assessment Reports and interactions with Assessors throughout the compliance review process; and
- 4.4.4 complaints received.

Reporting undertaken of ReturnToWorkSA's monitoring of the IAAS will be published on ReturnToWorkSA's website at least annually.

5 PERFORMANCE MANAGEMENT PROCESS

- 5.1 ReturnToWorkSA will assess alleged non-compliance with the Criteria for Accreditation, Terms and Conditions of Accreditation, Service Requirements, Ongoing Accreditation and/or the Quality Management Requirements on a case-by-case basis.
- 5.2 In most cases, it is expected that the Assessor and ReturnToWorkSA will identify and agree mutually satisfactory remedial actions to rectify any non-compliance.
- 5.3 The assessment and investigation of performance or compliance issues will be managed in accordance with principles of procedural fairness, which include:
 - being provided with the details of any performance or compliance issue;
 - being treated without bias and decisions being based upon relevant evidence;
 - parties likely to be adversely affected by a decision will receive all relevant information, and have an opportunity to present information and have their response taken into consideration before a final decision is made.
- 5.4 ReturnToWorkSA can require an Assessor to take remedial action in response to non-compliance against the Criteria for Accreditation, Terms and Conditions of Accreditation, Service Requirements, Ongoing Accreditation and/or the Quality Management Requirements.
- 5.5 Where ReturnToWorkSA continues to hold concerns about non-compliance, Assessors will be provided this in writing, with the required remedial actions outlined and an expected timeframe for completion.
- 5.6 Remedial actions may be at the Assessor's own cost.
- 5.7 Where an Assessor does not undertake the required remedial actions, and/or has continued non-compliance, or a non-compliance matter is of a magnitude determined by ReturnToWorkSA to be significant, ReturnToWorkSA may write to the Minister seeking the suspension or cancellation of their accreditation.
- 5.8 If an Assessor is unsatisfied with their experience of the Performance Management Process, they are encouraged to contact 13 18 55 or e-mail complaints@rtwsa.com.

Suspension or Cancellation of Accreditation

- 5.9 The IAAS provides for the suspension or cancellation of accreditation by the Minister on specified grounds as outlined in section 22(17)(c) of the Act.
- 5.10 Grounds which may result in the Assessor being suspended or removed from the list of Assessors by the Minister, precluding the Assessor from conducting Assessments for the RTW scheme, include (but are not limited to) circumstances where the Assessor:
- a) frequently fails to apply the methodology set out in the Act, the Guidelines or AMA5 or AMA4 (for Visual System);
 - b) fails to meet the Ongoing Accreditation Requirements, Terms and Conditions, Service Requirements, Declaration Requirements or Quality Management Requirements outlined within the IAAS;
 - c) is the subject of complaints substantiated by investigation, the frequency and seriousness of which will be considered on a case by case basis.
 - d) any other proper basis, including a breach of duty of care or unethical or unprofessional conduct.
 - e) fails to maintain, or fails to notify ReturnToWorkSA of a failure to maintain, the Criteria for Accreditation.
- 5.11 The decision to suspend or cancel an accreditation is made by the Minister, based on evidence provided by ReturnToWorkSA and any other relevant information.
- 5.12 Where an Assessor is dissatisfied by a decision of the Minister, the Assessor can write to the Minister and ask for a review of the decision, which may or may not be agreed to.
- 5.13 The Assessor must not undertake Assessments once accreditation is cancelled or under suspension, even Assessments that are booked. The Assessor may complete an Assessment where the appointment with the worker has occurred (and must do so in a timely manner).

If requested by the Requestor, the Assessor must cooperate in a timely manner to transfer a worker's Assessment to another Assessor.

6 COMPLAINT MANAGEMENT PROCESS

- 6.1 Assessors must conduct their services in line with the Service Standards, which are outlined in Schedule 5 of the Act.
- 6.2 Workers, employers or their representatives, can lodge complaints against an Assessor where they believe the Service Standards have not been met.
- 6.3 Complaints from workers or employers regarding services delivered by Assessors will be managed in accordance with the Act and the ReturnToWorkSA Complaints Policy.
- 6.4 If any party is dissatisfied with how ReturnToWorkSA has managed the complaint, they have the right to refer the matter to the State Ombudsman for investigation.
- 6.5 Where appropriate, an issue may be referred to the relevant health care complaints body (e.g. AHPRA) for investigation and action, depending upon the nature of the issue, and/or action may be taken in relation to an Assessor's accreditation.
- 6.6 To the extent that confidential information to which section 185 applies is required to be disclosed to the relevant health care complaints body for investigation and action, the Minister authorises this disclosure pursuant to section 185(3)(j) of the Act.
- 6.7 Where an Assessor has a complaint about a Requestor or other party involved in the Return to Work scheme, they can contact ReturnToWorkSA on 13 18 55 or email complaints@rtwsa.com.

GUIDE FOR SYSTEMS AND SPECIALTIES

GUIDANCE TABLE

The table on the following page provides a guide to body systems usually approved for specific specialty groups. If an application is received that is outside the guidance table, the applicant may provide additional evidence of qualifications and expertise in that area to support their application.

Notes

To assess cortico-spinal tract damage, Assessors need to be accredited in both Spine and Nervous System.

Assessors trained in the Upper Extremity, Lower Extremity or Spinal body systems may undertake Assessments of hernia in the Digestive system for Assessment from 0% to 5% WPI (Whole Person Impairment) only (including currently accredited GPs and Occupational Physicians).

Assessment of Complex Regional Pain Syndrome can only be undertaken by the following specialties: Orthopaedic Surgeon, Pain Specialist, Rheumatologist, Plastic Surgeon, Occupational Physician or Rehabilitation Physician following accreditation in the Upper Extremity and/or the Lower Extremity and following completion of the requisite training.

In relation to note 2 of Table 6.1 within the ENT chapter of the Guidelines, an assessor with ENT accreditation can assess up to 9% WPI from the TEMSKI table.

Sleep Physicians can assess sleep apnoea.

The following specialists are accredited to assess the conditions noted in Chapters 4 and 5 of the Guidelines with specific reference to Tables 13-18, 13-19, 13-20, 13-21 and 15-6 of AMA5 (relevant to their specialty).

Specialist	Condition
Urologist, Gynecologist	Neurogenic Bladder or Sexual Impairment
Gastroenterologist, General Surgeon	Neurogenic Anorectal Impairment
Thoracic Surgeon, Respiratory Physician	Neurogenic Impairment of Respiration

Key for Body Systems Table – page 27

*For cranial nerves only

For herniae only, Thoracic Surgeon only traumatic herniae.

¹ For peripheral nerves only

² For facial nerves only

³ Can use Table 6.1 in the Guidelines for assessment of facial disfigurement in the immediate periorbital area

⁴ For relevant trigeminal nerve assessments only

Body System	Cardiovascular (heart and aorta)	Cardiovascular (systemic and pulmonary)	Central and peripheral nervous	Digestive	Endocrine	ENT (excl. NIHL)	ENT (incl. NIHL)	Haematopoietic	Lower extremities	Psychiatric	Respiratory	Skin	Spine	Upper extremities	Urinary and reproductive	Visual	TEMSKI (Assessment of Skin up to 4% as per the IAGs)
Cardiologist	✓	✓															✓
Craniofacial Surgeon			✓*			✓						✓					✓
ENT						✓	✓										✓
Dermatologist												✓					✓
Gastroenterologist				✓													✓
General physician	✓	✓	✓	✓	✓			✓			✓	✓	✓	✓			✓
General surgeon				✓					✓				✓	✓			✓
Neurologist			✓						✓ ¹				✓	✓ ¹			✓
Neurosurgeon			✓										✓				✓
Occupational Physician				✓ [#]					✓		✓		✓	✓			✓
Ophthalmologist			✓ ⁴													✓ ³	✓
Ortho surgeon									✓				✓	✓			✓
Pain Specialist			✓						✓				✓	✓			✓
Plastic & Reconstructive surgeon			✓ ²			✓						✓		✓			✓
Psychiatrist										✓							
Rehab Physician			✓	✓	✓				✓			✓	✓	✓			✓
Respiratory physician											✓						✓
Rheumatologist				✓	✓				✓			✓	✓	✓			✓
Thoracic Surgeon	✓			✓ [#]							✓						✓
Urologist/ Gynaecologists															✓		✓
Emergency Medicine Specialist									✓				✓	✓			✓
Haematologist								✓									✓

IMPAIRMENT ASSESSOR ACCREDITATION SCHEME

Enquiries: 13 18 55

400 King William Street, Adelaide

South Australia 5000

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Free information support services:

TTY (deaf or have hearing / speech impairment):

Phone 13 36 77 then ask for 13 18 55

Speak & Listen (speech-to-speech):

Phone 1300 555 727 then ask for 13 18 55

Languages other than English:

Please ring the Interpreting and Translating Centre on

1800 280 203 and ask them to contact us on 13 18 55

Braille, audio, or e-text:

Call 13 18 55 and ask for required format.



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