



Code of conduct for self-insured employers

Version 12.1

Author: Regulation

Release Date: As published in the Government Gazette

Review Date: January 2028

Contents

GLOSSARY	1
PREAMBLE.....	3
CHAPTER 1	5
1. Obligations of a self-insured employer.....	5
1.1. Application	5
1.2. Obligations of a self-insured employer	5
1.3. Exercise of delegated powers and discretions.....	5
1.4. Self-insured employer fee.....	5
1.5. Financial distress	5
1.6. Actuarial reports	6
1.7. Guarantees	6
1.8. Excess of loss insurance.....	6
1.9. Annual reports.....	7
1.10. Schedule 3 of the Regulations	7
1.11. Provision of data	7
1.12. Notification of lump sum payments.....	8
1.13. Application of the Statement of Service Standards	9
1.14. Employer's duty to provide suitable employment and notice of termination of employment	9
1.15. Cooperation on information exchange	10

1.16.	Incidence of Liability	11
1.17.	Continuous Disclosure	11
1.18.	Other terms	11
CHAPTER 2		13
2.	ELIGIBILITY AND ASSESSMENT CRITERIA.....	13
2.1.	Application	13
2.2.	Satisfaction of <i>ReturnToWorkSA</i>	13
2.3.	Section 129 (11) of the Act assessment criteria	13
CHAPTER 3		17
3.	APPLICATIONS FOR INITIAL GRANT OF REGISTRATION AS A SELF-INSURED EMPLOYER.....	17
3.1.	Scope	17
3.2.	How to apply	17
3.3.	Expression of interest	17
3.4.	Application	17
3.5.	Assessment process	17
3.6.	Valuation of Liability Transfer Payment.....	18
3.7.	Decision by the <i>Board</i>	18
3.8.	Group registration.....	18
3.9.	Effective date of registration	19
3.10.	Initial period of registration.....	19
CHAPTER 4		20
4.	EVALUATIONS.....	20

4.1.	Application	20
4.2.	Application for renewal.....	20
4.3.	Evaluations.....	20
4.4.	Review process.....	20
CHAPTER 5		22
5.	GROUP SELF-INSURED EMPLOYERS AND CORPORATE RESTRUCTURE.....	22
5.1.	Application	22
5.2.	Group employers.....	22
5.3.	Subsidiary of a foreign company which is a holding company.....	22
5.4.	Amalgamations	23
CHAPTER 6		24
6.	REDUCTION, REVOCATION, AND APPEALS	24
6.1.	Application	24
6.2.	Notification.....	24
6.3.	Statutory criteria	24
6.4.	Process of reduction or revocation of registration.....	24
6.5.	Removal of delegation.....	25
6.6.	Prosecution	25
6.7.	Appeals to the Minister	25
CHAPTER 7		26
7.	TERMINATION/EXPIRATION OF REGISTRATION	26
7.1.	Application	26

7.2.	Delegation of powers and discretions.....	26
7.3.	Assumption of liabilities	26
7.4.	Valuation of capitalised liabilities	26
7.5.	Run off of claims.....	26
7.6.	Treatment of Claim files on cessation of self-insurance	27

Please refer to the following definitions when reading and interpreting *the Code*.

GLOSSARY

Term	Meaning
Act	the Return to Work Act 2014
Board	the Board of Management of <i>ReturnToWorkSA</i> as constituted by the RTWCA.
Code of conduct (Code)	the self-insured employer code as amended from time to time and published in the Gazette pursuant to section 129(5)(d)
Compensation Fund	the Compensation Fund pursuant to section 135 of the Act
Crown	the State of South Australia and any agency or instrumentality of the Crown in right of the State of South Australia.
Current Assets	cash and other assets that can be converted to cash within a year.
Current Liabilities	amounts due to be paid to creditors within twelve months.
employer	employer has the same meaning as in section 4 of the Act and includes where applicable a group of employers.
foreign company	has the same meaning as in section 129 of the Act
Full time equivalent employees	measure of employees based on no less than 35 hours per worker per week.
Gazette	as defined in section 4(1) of the Acts Interpretation Act 1915
group of self-insured employers	a group of self-insured employers registered under section 129(3) of the Act
holding company	has the same meaning as in section 129 of the Act
industrial association	as defined by section 4 of the Act
Labour hire worker	a labour hire worker is a person engaged through a labour hire company. These workers may be employed directly by the labour hire company, or by the labour hire company through a third party.
Loan Capital	current borrowings plus non-current borrowings
Net profit before tax	net profit before tax
Net Sales	revenue from sale of goods or services
non-compliance	a breach of, or failure to comply, with the Act, any Regulations or determinations made under the Act or a term or condition of registration
number of employees	for the purposes of section 129(11) of the Act the number of employees is calculated in a manner consistent with Clause 2.3.1
Operating Cash Flow	net cash flow from operating activities. Does not include cash flows from investing activities.
Regulations	the Return to Work Regulations 2015
related bodies corporate	has the same meaning as in section 129 of the Act

Term	Meaning
relevant legislation	The relevant legislation includes: • the Act • Regulations • the WHS Act • the WHS Regulations • the RTWCA • any other legislation of either the State or Commonwealth parliaments that may directly or indirectly affect the safety of workers in the self-insured employer's workplace or the management or administration of workers compensation claims
RTWCA	the Return To Work Corporation of South Australia Act 1994
<i>ReturnToWorkSA</i>	the Return to Work Corporation of South Australia
self-insured fee	has the same meaning as in section 146 of the Act
Schedule 3	Schedule 3 to the Regulations
Scheme	the Return to Work Scheme
self-insured employer	an employer or group of employers registered by <i>ReturnToWorkSA</i> as a self-insured employer pursuant to section 129 of the Act
Standards	Injury Management Standards for Self-insured Employers and WHS Standards for Self-insured Employers
Total equity	shareholder funds (Equity)
Total liabilities	current liabilities plus non-current liabilities
Total tangible assets	total current and non-current assets less intangible assets
transferred liability	liabilities of the self-insured employer under section 64(2) and 64(3) of the Act.
WHS Act	the Work Health and Safety Act 2012 (SA)
WHS employer registration fee	the fee payable under the South Australia Work Health and Safety Act 2012
worker	has the same meaning as in section 4 of the Act
work injury	has the same meaning as in section 4 of the Act

PREAMBLE

Note: Terms in italics are defined in the Glossary.

A. The purpose of this Code

The purpose of the *Code* is to:

- constitute a *code of conduct for self-insured employers* that each *self-insured employer* must comply with as a condition of its registration pursuant to section 129(5)(d) of the *Act*; and
- ensure all *self-insured employers* are aware of the ongoing obligations of registration as a *self-insured employer*; and
- express those terms and conditions to which registration of all *self-insured employers* are subject to as determined by *ReturnToWorkSA* under section 129(5)(a)(iii) of the *Act* (but not those terms and conditions that have been determined by *ReturnToWorkSA* to be applicable to an individual *self-insured employer*.)

B. Board Policy on Self-insurance

The *Board's* Policy on self-insurance is published on the *ReturnToWorkSA* website. An *employer* considering an application for registration as a *self-insured employer* or as a member of a group of *self-insured employers* should be familiar with the *Board* Policy.

Through the Policy on Self-insurance and the *Code*, the *Board* recognises,

- (1) The *Act* contains provision for *self-insured employer* status as an integral part of the *Scheme*.
- (2) The financial security of the *Scheme* is viewed as a relevant matter in the administration and continuation of *self-insured employer* registrations.
- (3) *Self-insured employer* status should only be made available to fit and proper *employers*, capable of achieving and maintaining the required level of performance as described in the *Code* and compliance with the requirements of the *Act*.
- (4) *Self-insured employer* status should only be made available to *employers* who can satisfy the *Board* as to their ability to continue to meet all obligations of registration as a *self-insured employer*, and that the granting of *self-insured employer* status is consistent with:
 - (a) the best interests of the *Compensation Fund* (not applicable to applications for renewal of a registration as a *self-insured employer*); and
 - (b) the achievement of the objects and functions specified in the *RTWCA* and the *Act*.
- (5) All *self-insured employers* are required to maintain compliance with the *Code* throughout the period of registration. Failure to comply may result in a potential revocation or reduction of a registration as a *self-insured employer*, conditions being placed on the *self-insured employer* registration, or refusal to renew a *self-insured employer* registration.

C. Inconsistencies

The *Code* and the relevant legislation operate concurrently.

Where there is an inconsistency between the *Code* and a provision of the relevant legislation, the relevant legislation will prevail.

CHAPTER 1

1. Obligations of a self-insured employer

1.1. Application

This chapter applies to *employers* registered as *self-insured employers* under section 129 of the *Act*.

1.2. Obligations of a self-insured employer

Registration as a *self-insured employer* is subject to,

- a) compliance with the requirements of the *Act*
- b) such other terms and conditions as *ReturnToWorkSA* determines from time to time or as are prescribed by the Regulations
- c) a condition that a *self-insured employer* or a *group of self-insured employers* will comply with any code of conduct determined by *ReturnToWorkSA* from time to time and published in the *Gazette*; and
- d) any other terms and conditions determined by *ReturnToWorkSA* to be applicable to an individual *self-insured employer* or a *group of self-insured employers*.

1.3. Exercise of delegated powers and discretions

At all times, a *self-insured employer* must have available an employee (or employees) authorised to exercise delegated powers and discretions pursuant to s 134 of the *Act*. These powers and discretions cannot be further delegated to any person or to an unrelated body corporate.

1.4. Self-insured employer fee

- a) Pursuant to section 146 of the *Act*, a *self-insured employer* fee is payable by a *self-insured employer*.
- b) The fee for all *self-insured employers* is subject to an annual review by the *Board*. The outcome of any review is applied from the commencement of the following financial year (1 July each financial year).

1.5. Financial distress

Financial stability and the ability to continue to meet the financial obligations of self-insurance are essential to the maintenance of a self-insurance registration. Therefore, a *self-insured employer* must notify *ReturnToWorkSA* immediately if it is in, or reasonably expects to be in, financial distress.

- a) For the purposes of this clause, a *self-insured employer* is in financial distress if it:
 - (i) is in liquidation or provisional liquidation or under administration
 - (ii) has a controller (as defined in the *Corporations Act 2001*) or analogous person appointed to it or any of its property or if any steps are taken for such an appointment
 - (iii) is taken under section 459F(1) of the *Corporations Act 2001* to have failed to comply with a statutory demand

- (iv) is unable to pay, or stops or suspends or threatens to stop or suspend payment of, its debts
- (v) an application or order, other than an application contested in good faith which is stayed, dismissed or withdrawn within 14 days, is made, or a resolution is passed, for its winding up or notice is given of an intention to make such an application or propose such a resolution other than a solvent reconstruction or amalgamation;
- (vi) is otherwise insolvent
- (vii) enters into a compromise or arrangement with, or an assignment for the benefit of, any of its members or creditors; or
- (viii) suffers an event analogous to any of the events described in this clause.

1.6. Actuarial reports

- a) A *self-insured employer* must submit an actuarial report within three months of the end of the *self-insured employer's* financial year.
- b) The actuarial report must be prepared by an actuary, following *ReturnToWorkSA's* actuarial guidelines for *self-insured employers*, as published on the *ReturnToWorkSA* Website.

1.7. Guarantees

- a) A *self-insured employer* must provide a financial guarantee determined in accordance with *Schedule 3*.
- b) The financial guarantee must be:
 - (i) an unconditional undertaking to pay money on demand
 - (ii) a continuing guarantee
 - (iii) provided by a financial institution that is not related to the *self-insured employer* and that has a Standard & Poor's credit rating not less than A+. *ReturnToWorkSA* will, accept a guarantee from an institution that has an A or A- rating provided that the guarantee from that institution in respect of any one *self-insured employer* does not exceed \$2million; and
 - (iv) provided by a financial institution that is subject to prudential regulation by the Australian Prudential Regulation Authority (APRA), unless *ReturnToWorkSA* decides otherwise.
- c) A *self-insured employer* may request *ReturnToWorkSA* to accept other forms of security, which provide a comparable level of security. *ReturnToWorkSA* will have the sole discretion as to whether to accept such alternative forms of security.

1.8. Excess of loss insurance

- a) A *Self-insured employer* must obtain and maintain an excess of loss insurance policy and provide a full copy of this policy to *ReturnToWorkSA*.
- b) Such excess of loss insurance must satisfy the following:
 - (i) not less than \$100 million on the sum insured,

- (ii) a deductible of not less than \$500,000 per event or series of related events, and
- (iii) if the *self-insured employer* elects to include a stop loss excess or an aggregate excess, such stop loss or aggregate excess must not be less than the higher of:
 - (A) three times the individual event excess, or
 - (B) Ten percent above the average incurred claim cost for the three immediately prior years.
- c) The excess of loss policy must not be contingent on the solvency of the *self-insured employer*, a *group of self-insured employers* or member of a *group of self-insured employers*.
- d) *ReturnToWorkSA* must be listed as a beneficiary on the excess of loss policy. In the event the *Self-insured employer* ceases to be registered as a *Self-insured employer* and all or part of its liabilities are undertaken by *ReturnToWorkSA*, *ReturnToWorkSA* will claim the benefits for such liabilities otherwise payable to the former *Self-insured employer* in accordance with the terms and conditions of its excess of loss policy, which notes the respective rights and interests of *ReturnToWorkSA* as a joint reinsured party.

1.9. Annual reports

- a) A *Self-insured employer* must:
 - (i) Provide audited annual financial statements no later than five months after the expiry of the *self-insured employer's* financial year.
 - (ii) notify *ReturnToWorkSA* in the event of any change to the position of:
 - (A) Chief Executive Officer of the *self-insured employer*, or
 - (B) any officer or officers, who has responsibility for the compliance of the *employer* with the requirements of the *WHS Act* and injury management systems.

1.10. Schedule 3 of the Regulations

A *self-insured employer* must comply with any policies or requirements notified by *ReturnToWorkSA* from time to time in relation to the application of Schedule 3, including but not limited to the current version of the Self-Insured Employer EDI Technical Specification published on the *ReturnToWorkSA* website.

1.11. Provision of data

- a) A *self-insured employer* will have complied with these obligations if it establishes and maintains a consistent and regular pattern of data provision. For these purposes, a 'consistent and regular pattern' will be:
 - (i) data provided within the reporting period of 14 days or such other time as approved or stipulated by *ReturnToWorkSA*;
 - (ii) no more than two missed or failed/rejected data transmissions in any six-month period;
 - (iii) no occurrences of two or more consecutive missed or failed/rejected transmissions;
 - (iv) all errors at batch and line levels resolved within one month;

- (v) all coding queries resolved within one month;
- (vi) when the *self-insured employer* changes its claims database, it should discuss the arrangements for data transmissions during the period of system transition with *ReturnToWorkSA*, to ensure any resulting lapse in data transmission does not exceed one month, or where delays are beyond the control of the *self-insured employer*, such other period as agreed between *ReturnToWorkSA* and the *self-insured employer*;
- (vii) when *ReturnToWorkSA* changes the data requirements, the *self-insured employer* meets those new data requirements within three months of being notified of those changes; and
- (viii) when an *employer* is first granted registration as a *self-insured employer*, an operational and compliant claims database must be implemented with transmissions commencing within three months after the first grant of registration.

1.12. Notification of lump sum payments

- a) Without limitation, lump sum payments will ordinarily include:
 - (i) redemptions of future:
 - (A) income maintenance; or
 - (B) costs pursuant to section 33 of the *Act*;
 - (ii) economic loss compensation payments pursuant to section 56 of the *Act*;
 - (iii) non-economic loss compensation payments pursuant to section 58 of the *Act*;
 - (iv) a commutation paid under section 59 of the *Act* in respect of weekly payments arising from the death of a *worker*; and
 - (v) a lump sum payment to a spouse, or dependant of a deceased *worker* under section 61 of the *Act*.
- b) Notification
 - (i) A *self-insured employer* must, within 14 days of making a payment:
 - (A) on a lump sum to a *worker*; or
 - (B) any addition or alteration to a determination in paragraph (A), complete and forward to *ReturnToWorkSA* a notification of that lump sum determination, addition, or alteration.
 - (ii) The notification must be in such form as *ReturnToWorkSA* may approve from time to time.
 - (iii) The notification must be accompanied by a copy of the determination.
 - (iv) The following information must also accompany the notification:
 - (A) for any redemption, a copy of the redemption agreement and SAET orders

- (B) for any income maintenance redemption, the amount of weekly income maintenance redeemed and the current rate of notional weekly earnings
- (C) a copy of the most recent determination of weekly payment entitlements stating the section 49(2) amount
- (D) for a non-economic loss compensation payment, the determinations stating percentage of injury upon which the calculation is based
- (E) for economic loss compensation payments, the determination which identifies all factors specified by section 56 (4) demonstrating how the lump sum was calculated; and
- (F) for recoveries against a third party wrongdoer under section 66 of the *Act*, a copy of the deed of release stating the amount of damages retained by the *worker* and the rate of payments the *worker* will be taken to be receiving under section 49 (3) of the *Act*.

1.13. Application of the Statement of Service Standards

In applying the statement of service standards, the *employer or self-insured employer* will:

- a) ensure procedures are in place which describe how the *self-insured employer* will meet the requirements of the statement of service standards
- b) ensure that all providers of relevant services engaged by the *self-insured employer* meet the requirements of the statement of service standards
- c) provide to *ReturnToWorkSA* within 30 days of receipt a copy of any investigation report provided to it by the State Ombudsman; and
- d) any investigation report provided by the Ombudsman and provided to *ReturnToWorkSA* must be accompanied by written details of any corrective actions undertaken or being undertaken by the *self-insured employer* to address any substantiated complaint.

1.14. Employer's duty to provide suitable employment and notice of termination of employment

- a) A *self-insured employer* must ensure compliance with sections 18 and 20 of the *Act*.
- b) *Self-insured employers*, as large and diverse businesses, in the main will be able to create opportunities to provide suitable employment to injured workers. Situations will however arise where *self-insured employers* may not be able to achieve this.
- c) A *self-insured employer* must on informing a worker of an inability to provide suitable employment, also notify *ReturnToWorkSA* of the non-provision of suitable employment.
- d) *Self-insured employers* are also encouraged to proactively report situations where their compliance with section 18 and/or section 20 may potentially come into question.
- e) *Self-insured employers* acknowledge that a contravention or failure to comply with the provisions of section 18 and/or section 20 will be a matter which *ReturnToWorkSA* will consider (under section 129(11) of the *Act*) in determining whether a self-insured registration is to be renewed.

- f) A contravention or failure to comply with section 18 and/or section 20 of the *Act* may result in *ReturnToWorkSA* applying a term or condition to the *employer's* registration. Furthermore, *ReturnToWorkSA* may revoke, or reduce the registration of an *employer* as a *self-insured employer* or take such alternative action, proportionate to the severity of the failure to comply with its obligations, as is deemed appropriate in the circumstances. A notification under clause 1.14 c) must include information used to assess suitable employment options, including details of:
- (A) the nature of the *worker's* incapacity and previous employment
 - (B) the *worker's* age, education, skills and work experience
 - (C) the *worker's* place of residence
 - (D) medical information relating to the *worker* that is reasonably available, including in any medical certificate or report
 - (E) if any recovery/return to work services are being provided to or for the *worker*
 - (F) the *worker's* recovery/return to work plan, if any
 - (G) the process and the outcome of the process undertaken by the self-insurer to assess the suitable employment options with the *self-insured employer* or the *group of self-insured employers* when taking into account its assessment of items A to F above; and
 - (H) factors relating to the exclusions detailed in section 18(2) (b) to (e) of the *Act*.
- g) A *self-insured employer* must provide *ReturnToWorkSA* with 28 days' notice of the termination of a worker who has suffered a work injury unless,
- (A) the *worker's* employment was terminated on the grounds of serious and wilful misconduct. The burden of establishing that an *employer* terminated a *worker's* employment on the ground of serious and wilful misconduct lies on the *employer*
 - (B) the worker is neither participating in a recovery/return to work plan, nor receiving compensation for the *work injury*; or
 - (C) the *worker's* rights to compensation for the injury have been exhausted or the time for making a claim for compensation has expired.
- h) A *self-insured employer's* notice of termination under clause 1.14 (g) must include:
- (A) the information required under clause 1.14 (f)
 - (B) the grounds for termination
 - (C) the proposed date of termination
 - (D) the last date of compensation (weekly payments or medical expenses); and
 - (E) factors relating to the exclusions detailed in section 20(2) (a) to (c) of the *Act*.

1.15. Cooperation on information exchange

This clause applies where:

- a) a *worker* or former worker of a *self-insured employer* has suffered a compensable injury;
- b) the *worker* or former *worker* of the *self-insured employer* became entitled to weekly payments from the *self-insured employer* in respect of that *compensable injury*; and
- c) the *worker* or former *worker* of the *self-insured employer* suffers a subsequent *compensable injury* whilst employed by a different *employer*.

The *self-insured employer* must cooperate with:

- (i) *ReturnToWorkSA*;
- (ii) *ReturnToWorkSA*'s claims agents; or another *self-insured employer*,

(as the case may be) by providing information to *ReturnToWorkSA* regarding such information as is reasonably required by *ReturnToWorkSA* or the other *self-insured employer* (as determined by *ReturnToWorkSA*) for:

- a) the calculation of the *worker's* or former *worker's* entitlements arising from the subsequent *compensable injury*; or
- b) the management of the *worker's* or former *worker's* claim for compensation or recovery and return to work arising from the subsequent *compensable injury*.

1.16. Incidence of Liability

In connection with the assumption of liability by a *self-insured employer* under Section 64 (3) of the *Act*, *ReturnToWorkSA* will determine the value of any payment, payable by or to *ReturnToWorkSA*, in accordance with guidelines published on the *ReturnToWorkSA* website.

1.17. Continuous Disclosure

- a) An employer granted registration as a self-insured employer has an ongoing obligation to notify *ReturnToWorkSA* of any change to its circumstances or conditions, which are relevant to that registration.
- b) A self-insured employer must notify *ReturnToWorkSA* as soon as practicable of:
 - i. any breach or failure to comply with the *Act* or a term or condition of registration
 - ii. any change to its circumstances, which may cause them to be in breach of a term or condition of registration
 - iii. any death where there is a connection, or potential connection with the *self-insured employer's* workplace or the activities associated with the *self-insured employer's* operations
 - iv. Any significant change in labour hire arrangements

1.18. Other terms

The Corporation may impose other conditions, relating to the self-insured employer's record of compliance with this *Code* or a legislative obligation, on a *self-insured employer's* registration, as it considers reasonable and appropriate, during the course of the registration period. Such conditions need not be imposed at the time of registration. The Corporation may also vary, or remove a condition so imposed. The Corporation will, within 30 days of its decision to impose or vary a condition on a self-insured employer's registration, notify the self-insured employer, in

writing, of that decision, the reasons for its decision and the period for which the condition is imposed.

CHAPTER 2

2. ELIGIBILITY AND ASSESSMENT CRITERIA

2.1. Application

This chapter applies to all *employers* or *self-insured employers* including an *employer* applying for an initial grant of registration as a *self-insured employer*.

2.2. Satisfaction of *ReturnToWorkSA*

- a) An *employer* or *self-insured employer* must establish, to the satisfaction of *ReturnToWorkSA*, it has reached the standard that must be achieved before a grant or renewal of self-insured status will be considered.
- b) In addition to the considerations *ReturnToWorkSA* must have regard to under section 129(11) of the *Act*, *ReturnToWorkSA* may have regard to such other matters as it considers relevant, when deciding whether to grant or renew registration as a *self-insured employer*.

2.3. Section 129 (11) of the Act assessment criteria

2.3.1. Number of employees employed by the employer or group (s129 11(a) of the Act)

Ordinarily the *number of employees* required for an application for an initial grant of registration as a *self-insured employer* or a renewal of *self-insured employer* registration will be 200 or more *full time equivalent* employees.

Note: This requirement is not on its own a bar to registration as a *self-insured employer* if all other requirements are met.

2.3.2. Financial viability

- a) An *employer* or *self-insured employer* must demonstrate it is likely to continue to be able to meet its liabilities.
- b) Performance against the following benchmarks is a relevant indicator of the likelihood of the *employer* or *self-insured employer* continuing to be able to meet its liabilities. This list should not be considered as exhaustive:

Performance Benchmarks

- (i) Balance sheet test, being *total tangible assets* divided by *total liabilities*.
- (ii) Gearing ratio, being *loan capital* divided by *total equity*.
- (iii) Liquidity ratio, being *current assets* divided by *current liabilities*.
- (iv) Cash Flow Margin, being *operating cash flow* divided by *net sales*.
- (v) Profitability ratio, being *net profit before tax* divided by *total equity*.

- c) The following industry specific benchmarks apply:

Industry Group	Balance Sheet	Gearing	Liquidity	Cash flow margin	Profitability
Manufacturing	≥1.6	≤60%	≥1.3	≥5%	≥10%
General Contracting	≥1.2	≤50%	≥1.3	≥5%	≥5%
Not for Profit	≥1.2	≤50%	≥1.3	≥5%	≥n/a
Retail	≥1.2	≤50%	≥1.3	≥3%	≥10%
Other	≥1.2	≤50%	≥1.3	≥7%	≥5%

- d) *ReturnToWorkSA* may consider an employer that provides financial guarantees on behalf of another *self-insured employer* as meeting the required level of financial performance.

2.3.3.Claims administration resources

When assessing whether the *employer* or *self-insured employer* has sufficient resources for administering claims for compensation, *ReturnToWorkSA* will have regard to the following matters:

- a) the qualifications and experience of the officers responsible for claims administration
- b) the number, frequency, complexity and duration of claims
- c) job description of the officers responsible; and
- d) the performance of the *employer* or *self-insured employer* as measured against the *Code* and Injury management standards.

2.3.4.Incidence and severity of injuries

- a) The incidence and severity of injuries for an *employer* or *self-insured employer* will be evaluated taking into account:
 - (i) the mechanism, nature, and agency of injuries sustained in the *employer's* workplace
 - (ii) the consequence of injuries sustained in the workplace
 - (iii) the strategies and activities implemented by the *employer* to reduce the incidence and severity of injuries.

2.3.5.Effect of working conditions

When assessing the effect, or likely effect, of the working conditions under which *workers* are employed by the *employer* or *self-insured employer* on the health and safety of those *workers*, *ReturnToWorkSA* will have regard to all relevant circumstances including:

- a) the performance of the *employer* or *self-insured employer* evaluated against the *WHS standards*
- b) the death of a person in the workplace including details of the incident leading to the fatality and any remedial action taken by the *employer* or *self-insured employer*

- c) any successful prosecution against an *employer* or *self-insured employer* for a breach of the *WHS Act* resulting in a death; and
- d) any work health and safety prosecution, not being a prosecution for a death of a person in the workplace, of an *employer* or *self-insured employer* which, in the opinion of *ReturnToWorkSA*, indicates a non-conformance with the standards.

2.3.5.1. Effect of working conditions for other workers

- a) *ReturnToWorkSA* considers the working conditions under which *labour hire workers* and contract workers are employed at the workplace(s) of the *employer* or *self-insured employer* to be a relevant matter in deciding whether to grant, renew, revoke, or reduce a period of registration as a *self-insured employer*.
- b) Self-insured employers are expected to ascertain that all labour hire workers performing work for them are employed by companies which are registered for injury insurance (either premium-paying or self-insured).

2.3.6. Return to Work Services

When assessing the record of the *employer* or *self-insured employer* in relation to the provision of recovery and return to work services to *workers* who suffer work injuries, *ReturnToWorkSA* will have regard to all relevant circumstances including the:

- a) performance of the *employer* or *self-insured employer* evaluated against the Injury Management Standards, as relevant to the recovery and return to work of *workers*
- b) *employer* or *self-insured employer's* record in relation to recovery and return to work, including:
 - (i) sustainable early return to work outcomes
 - (ii) placement of *workers* in suitable and sustainable employment
 - (iii) record of compliance with the requirements of *ReturnToWorkSA* in relation to sections 18, 20 and 25 of the *Act*
 - (iv) provision of lifetime care and support for seriously injured workers
 - (v) the resources applied to supporting recovery and return to work, and
 - (vi) nature and outcomes of any program, whether it is officially recorded and described or simply a practice whereby treatment is offered and provided for a limited or extended period of time without a claim being lodged.

2.3.7. Provision of suitable employment

When assessing the record of the *employer* or *self-insured employer* in providing suitable employment to *workers* who suffer work injuries, *ReturnToWorkSA* will have regard to all relevant circumstances including:

- a) The employer's or *self-insured employer's* record and attitude towards the provision of suitable employment for workers who have suffered work injuries, including any action taken by *ReturnToWorkSA*, or any application for SAET orders by the employer's *workers*, concerning sections 18, 20 and 25 of the *Act*; and

- b) The employer's or *self-insured employer's* record and attitude towards the provision of suitable employment to labour hire and contract workers who have suffered a work *injury* in the employer's or *self-insured employer's* Workplace(s).

2.3.8.Views of relevant industrial associations

- a) *ReturnToWorkSA* must have regard to the opinions of any *industrial association* that has, in the opinion of *ReturnToWorkSA*, a proper interest in the matter.
- b) *ReturnToWorkSA* will ordinarily consider the following *industrial associations* as having a proper interest in the matter:
 - (i) an *industrial association*, including State level officials of an association, that may have members employed by the *self-insured employer*
 - (ii) on-site representatives of any relevant industrial association
 - (iii) other workers or their nominated representatives as considered appropriate by *ReturnToWorkSA*; and
 - (iv) any employer, business, or industry associations of which the *self-insured employer* is a member.
- c) The *employer* or *self-insured employer* must identify and contact in writing all *industrial associations* that have a proper interest and must satisfy *ReturnToWorkSA* that all such *industrial associations* have been identified and have been consulted in writing but doing so will not prohibit *ReturnToWorkSA* from making contact with *industrial associations* to inform it of their opinions.
- d) If four weeks after being contacted by the *employer* or *self-insured employer* there has been no response from the relevant *industrial associations*, the *industrial associations* will be deemed by the *employer* or *self-insured employer* and *ReturnToWorkSA* to have no objection to the application.

2.3.9. Effect on the fund

- a) Except in relation to an application for renewal, *ReturnToWorkSA* may consider the effect on the *Compensation Fund* of granting *self-insured employer* registration to a particular *employer* or group of *employers*.
- b) When assessing the effect of an application for *self-insured employer* registration on the *Compensation Fund*, *ReturnToWorkSA* will have regard to all relevant circumstances.

CHAPTER 3

3. APPLICATIONS FOR INITIAL GRANT OF REGISTRATION AS A SELF-INSURED EMPLOYER.

3.1. Scope

This chapter applies to an application for the grant of registration as a *self-insured employer* under section 129(1) of the Act.

It does not apply to:

- a) an existing *self-insured employer* who has applied for renewal of its registration as a *self-insured employer* pursuant to section 129(1) of the Act, or
- b) an application by a *self-insured employer* or *group of self-insured employers* under section 129(7)(a) of the Act.

3.2. How to apply

- a) Prior to commencing an application, an *employer* should contact *ReturnToWorkSA* to discuss the application process and ongoing requirements of registration as a *self-insured employer*.
- b) An Application will consist of both:
 - (i) An Expression of Interest.
 - (ii) An Application for registration as a *self-insured employer*.

3.3. Expression of interest

- a) An *employer* is required to complete the Expression of Interest template published on the *ReturnToWorkSA* website and submit it to *ReturnToWorkSA*.

3.4. Application

- a) An *employer* must apply to *ReturnToWorkSA* for registration as a *self-insured employer*.
- b) An application for registration as a *self-insured employer* must:
 - (i) include a completed Application template as published on the *ReturnToWorkSA* website; and
 - (ii) be accompanied by the payment of the prescribed fee.

3.5. Assessment process

3.5.1. Expression of Interest

ReturnToWorkSA will review the completed *Expression of Interest* and provide advice to the *employer* on its suitability for registration as a *self-insured employer*.

3.5.2. Application for an initial grant of registration

- a) On submission of an Application for an initial grant of registration as a *self-insured employer*, and payment of the prescribed fee, *ReturnToWorkSA* will arrange with the *employer* to:
 - (i) review the *employer's* application
 - (ii) evaluate the *employer's* work health, safety and injury management systems.
- b) Evaluation of the *employer's* work, health and safety and injury management systems will be in accordance with the *ReturnToWorkSA* Self-insured Evaluation Practice Manual as published on the *ReturnToWorkSA* website.
- c) At the conclusion of the evaluation process, the *employer* will receive an Evaluation Report. On receipt of an Evaluation Report, an *employer* may elect to:
 - (i) cease the application process; or
 - (ii) proceed to the consideration of its application by the *Board of ReturnToWorkSA*.
- d) An *employer* may choose to make a submission in response to the Evaluation Report, which will be provided to the *Board of ReturnToWorkSA* in conjunction with the *employer's* Application and the Evaluation Report. The submission may include details of corrective actions in response to any non-conformances identified.

3.6. Valuation of Liability Transfer Payment

Prior to *Board* consideration of an application for the initial grant of registration as a *self-insured employer*, the *employer* will need to agree the terms and conditions for the transfer of liabilities (including all the necessary financial calculations and adjustments) pursuant to section 64(3) and 64(4) of the *Act* with *ReturnToWorkSA*.

3.7. Decision by the Board

- a) The *Board* must determine an Application for the initial grant of registration as a *self-insured employer*.
- b) The *Board's* decision to reject an application for *self-insured employer* registration is subject to appeal as set out in Chapter 6.
- c) *ReturnToWorkSA* acknowledges that it is obliged to determine applications for self-insurance as expeditiously as is reasonably possible once an Application for an initial grant of registration has been completed.

3.8. Group registration

- a) Pursuant to section 129(12) of the *Act*:
 - (i) Where *related bodies corporate* are registered as a *group of self-insured employers*, the *employer* so nominated by the group shall be treated as the *self-insured employer* of all *workers* employed by the various members of the group.
 - (ii) All members of the group are jointly and severally liable to satisfy the liabilities of the nominated *self-insured employer*.

- b) Pursuant to section 129(13) of the *Act*, *ReturnToWorkSA* may, on application from the group, change the nominated employer. When considering an application to do so *ReturnToWorkSA* will take into account the following principles:
- (i) whether it would be a significant change to the *group of self-insured employers*
 - (ii) the effect of the change on the financial status of the group. Any material deterioration in financial status will require consideration of whether or not the group can still be supported as an *ongoing group of self-insured employers*
 - (iii) whether the change requires any amendments to financial guarantee or excess of loss insurance arrangements. If so, they must be satisfactorily resolved prior to or concurrent with approval of the change; and
 - (iv) a change of name of an existing company where there is no change of the Australian Company Number does not require an application to change nominated employer.

3.9. Effective date of registration

- a) Registration takes effect from a date fixed by *ReturnToWorkSA*.
- b) The *employer* and *ReturnToWorkSA* can agree the registration take effect from a date after the date fixed under paragraph (a) but no extension will be given beyond six months. If the registration is not taken up by that time, the original approval of self-insurance will be considered to have lapsed.
- c) *ReturnToWorkSA* cannot backdate a registration.
- d) Once the application is approved, the *employer* will need to submit the required financial guarantee and evidence of the existence of the excess of loss insurance policy before its registration as a *self-insured employer* can commence.

3.10. Initial period of registration

- a) Registration will be subject to evaluation against the *Injury Management Standards* within the first year of registration. Should the *self-insured employer* fail such evaluation, *ReturnToWorkSA* may take such action, as it deems appropriate in the circumstances, having regard to the nature of the *non-compliance*.

CHAPTER 4

4. EVALUATIONS

4.1. Application

This chapter applies to all *employers* who are either:

- a) applying for an initial grant or renewal of registration as a *self-insured employer*; or
- b) registered as a *self-insured employer*, where evaluations may occur with respect to whether they maintain that registration.

4.2. Application for renewal

A *self-insured employer* wishing to renew its registration as a *self-insured employer* must notify *ReturnToWorkSA* of its intention to renew its registration.

4.3. Evaluations

4.3.1. Grant or renewal of registration

- a) *ReturnToWorkSA* will evaluate the *employer's* performance against the terms and conditions of registration.
- b) A validation of the *employer's* data provided in accordance with *Schedule 3* may occur from time to time.
- c) *ReturnToWorkSA* will undertake evaluations in line with the methodology set out in the Evaluation Practice Manual published on the *ReturnToWorkSA* website.

4.3.2. Ongoing evaluation

- a) *ReturnToWorkSA* may require a *self-insured employer* or an applicant for an initial period of registration as a *self-insured employer*, to provide submissions on compliance with the terms and condition of registration as they apply from time to time.
- b) *ReturnToWorkSA* will monitor *self-insured employers* on an ongoing basis between programmed evaluations.
- c) A self-insured employer is required to cooperate and participate with any enquiry or monitoring activity, pertaining to the *self-insured employer's* compliance with relevant legislation and/or this *Code*, undertaken by *ReturnToWorkSA* under terms agreed with the *self-insured employer*.

4.4. Review process

- a) Where an *employer* or *self-insured employer* disagrees with an assessment made by *ReturnToWorkSA* in respect of any of the criteria contained in section 129 of the *Act* or the *Code* as part of an evaluation, a review process will be available as follows:
 - (i) The *employer* or *self-insured employer* must write to the General Manager Regulation within 30 calendar days of receiving the written provisional findings. The *employer* or

self-insured employer must ensure that it specifies the area(s) of disagreement and provides evidence supporting its position.

- (ii) *ReturnToWorkSA* will review the evaluation findings and the *employer's* or *self-insured employer's* submission and, if appropriate: change its findings; or
- (iii) If the matter is not resolved, the *employer* or *self-insured employer* may request that *ReturnToWorkSA* appoint a different evaluator to undertake a peer review. The peer review will consider the *employer's* or *self-insured employer's* response to the initial findings and make a final assessment for consideration by the *Board* or its delegate.
- (iv) The *employer* or *self-insured employer* will be provided with the final assessment and recommendation to the *Board* or its delegate.

CHAPTER 5

5. GROUP SELF-INSURED EMPLOYERS AND CORPORATE RESTRUCTURE

5.1. Application

This chapter applies to all *employers* registered under section 129 of the *Act*.

5.2. Group employers

- a) A *self-insured employer* must at all times ensure any *related body corporate* to any member of the group that employs a *worker* or *workers* in employment to which this *Act* applies is a member of the group.
- b) A request to amend a *self-insured employer* registration under s129(7) of the *Act* must include the following details in relation to all new, existing, and exiting related *Body corporate*:
 - (i) *the structure of the group showing the relationships between all related bodies corporate within the new group registration*
 - (ii) the trading name of all *related bodies corporate* included in the new group registration
 - (iii) the entity Name of all *related bodies corporate* included in the new group registration
 - (iv) ACN and/or ABN of all *related bodies corporate* included in the new group registration
 - (v) number of employees of all *related bodies corporate* included in the new group registration
 - (vi) the name of the *employer* nominated pursuant to section 129(12)
 - (vii) whether a *body corporate* is a *related body corporate* to the *self-insured employer* by virtue of it being a subsidiary of a *foreign company*
 - (viii) the plan of arrangements for inclusion of all new *related bodies corporate* into the registration of the new group of *self-insured employers*.
- c) A *group of self-insured employers* must, prior to the commencement of the new group registration, provide an updated financial guarantee and excess of loss insurance policy to reflect changes to the group of *self-insured employers*.
- d) If adding a new *related body corporate*, transfer of liability arrangements will apply.

5.3. Subsidiary of a foreign company which is a holding company

- a) A *self-insured employer* must notify *ReturnToWorkSA* if a *body corporate* exists that may be considered a *related body corporate* to the *self-insured employer* by virtue of it being a subsidiary of a *foreign company*.
- b) *ReturnToWorkSA* in determining *related bodies corporate* under clauses 3.8 and 5.2 of the *Code* will ordinarily consider the following when those *related bodies corporate* are subsidiaries of a *foreign company*:

- (i) workforce structure of the subsidiary and *the self-insured employer*
 - (ii) management and reporting structure
 - (iii) the relevant size of the subsidiary and the *self-insured employer*
 - (iv) industry the subsidiary operates in
 - (v) the views of the subsidiary and the *self-insured employer*; and
 - (vi) any other matter *ReturnToWorkSA* considers relevant.
- c) Where *ReturnToWorkSA* determines that a body corporate that would otherwise be a *related body corporate* should be excluded from the self-insured group by virtue of the fact the relationship occurs solely through a *foreign company*, *ReturnToWorkSA* will advise the *self-insured employer* of each exclusion.
- d) If *ReturnToWorkSA* determines that the *related body corporate* should be included in a self-insured registration, the *self-insured employer* must apply to add that *related body corporate* to its self-insurance registration.
- e) *ReturnToWorkSA* may review or change each determination to exclude the body corporate from the self-insured group, if the facts relating to that consideration change for any reason.

5.4. Amalgamations

- a) Where a member of a group of *self-insured employers* acquires another *self-insured employer*, or all the members of another group of *self-insured employers*, they may apply, in former case, to add that *self-insured employer* to the group pursuant to section 129(7)(a) of the *Act* and, in the latter case, apply to amalgamate their registrations so as to form a group pursuant to section 129(7)(c) of the *Act*.
- b) A failure by the *self-insured employer* or group of *self-insured employers* to make such an application (or the refusal of such an application by *ReturnToWorkSA*) will be taken into account by *ReturnToWorkSA* when considering whether to cancel or not renew the *self-insured employer* or group of *self-insured employer's* current registration as a *self-insured employer* or group of *self-insured employers*.
- c) If required to submit a new application for registration as a group of *self-insured employers*, appropriate consideration will be given to the performance of the previously registered *self-insured employer*. Where new entities that were not previously self-insured are added to existing groups or a previously single registration becomes a new group, *ReturnToWorkSA* will consider submissions from the entity on the timing of the full application of the entity or entities added to the group.

CHAPTER 6

6. REDUCTION, REVOCATION, AND APPEALS

6.1. Application

This chapter applies to all *self-insured employers* whose period of registration is being considered for reduction or revocation by *ReturnToWorkSA*.

6.2. Notification

Pursuant to a *self-insured employer's* obligations of notification set out in Chapter 1 and paragraph 10 of *Schedule 3*, a *self-insured employer* must notify *ReturnToWorkSA* as soon as practicable of:

- a) any breach or failure to comply with the *Act* or a term or condition of registration; or
- b) any change to its circumstances, which may cause them to be in breach of a term or condition of registration.

6.3. Statutory criteria

- a) In deciding whether to reduce or revoke the registration of a *self-insured employer*, *ReturnToWorkSA*:
 - (i) will have regard to the considerations *ReturnToWorkSA* must have regard to pursuant to section 129 of the *Act*; and
 - (ii) may have regard to such other matters, as it considers relevant.

6.4. Process of reduction or revocation of registration.

- a) *ReturnToWorkSA* recognises that a reduction or revocation of registration as a *self-insured employer* has potentially serious consequences for a *self-insured employer*.
- b) Prior to *ReturnToWorkSA* making a recommendation to the *Board* that the registration of a *self-insured employer* should be reduced or revoked, *ReturnToWorkSA* will (unless there are good reasons for proceeding urgently):
 - (i) request the *self-insured employer* to show cause why *ReturnToWorkSA* should not revoke or reduce the period of registration
 - (ii) provide to the *self-insured employer* a reasonable period of time during which the *self-insured employer* may respond to the notification
 - (iii) provide to the *self-insured employer* a reasonable period of rectification during which the *self-insured employer* may demonstrate to *ReturnToWorkSA* its compliance with the *Act* and the terms and conditions of registration; and
 - (iv) in the circumstances of a revocation, inform the self-insured employer of its rights to appeal the decision of *ReturnToWorkSA* prior to the decision taking effect.
- c) Without limitation, clauses 6.4 (b)(i), 6.4 (b)(ii) and 6.4 (b)(iii) will not apply if *ReturnToWorkSA* is of the opinion that the circumstances require an immediate revocation of the registration.

- d) Clause 6.4 (b)(iii) will not apply if *ReturnToWorkSA* is of the opinion that the breach or failure to comply with the *Act* or a term or condition of registration is of such a nature that it cannot be rectified within a reasonable period.

6.5. Removal of delegation

- a) Pursuant to section 134(7) of the *Act*, *ReturnToWorkSA* may consider the removal of delegation of a power or discretion if it is exercised unreasonably by the *self-insured employer*.
- b) *ReturnToWorkSA* will consider the removal of delegation of a power where in all the circumstances it is appropriate to do so, including where the serious or fundamental breach is the exercise of a power or discretion unreasonably but the *self-insured employer* is otherwise complying with the *Act*.
- c) In the circumstances referred to in this clause, *ReturnToWorkSA* may withdraw the delegation until such time it is satisfied the power or discretion will be exercised reasonably.

6.6. Prosecution

Pursuant to sections 198 of the *Act*, *ReturnToWorkSA* may consider prosecution where a *self-insured employer* is in breach or fails to comply with the *Act*.

6.7. Appeals to the Minister

Pursuant to section 133 of the *Act*, *self-insured employers* may appeal to the Minister against a decision of *ReturnToWorkSA* in circumstances outlined in section 133(1) of the *Act*. This must be done in writing to the Minister.

- a) A *self-insured employer* must commence an appeal within one month after the *employer* receives notice of *ReturnToWorkSA*'s decision unless the Minister allows an extension of time for the appeal.
- b) If an appeal to the Minister is against a decision of *ReturnToWorkSA* to refuse to renew, or to cancel the registration of the *employer*, as a *self-insured employer*, *ReturnToWorkSA* may extend or renew the registration of the *employer* for a period of up to 3 months (pending resolution of the appeal).

CHAPTER 7

7. TERMINATION/EXPIRATION OF REGISTRATION

7.1. Application

This chapter applies to any *employer* whose registration as a *self-insured employer* ceases for any reason.

7.2. Delegation of powers and discretions

- a) Pursuant to section 134(8) of the *Act*, *ReturnToWorkSA* may determine that the delegation of powers and discretions to an *employer* is to continue notwithstanding that the *employer* has ceased to be a *self-insured employer*.
- b) If *ReturnToWorkSA* determines that the delegation of powers and discretions are to continue, the delegation continues only to such extent as *ReturnToWorkSA* thinks fit in relation to injuries that occurred before cessation of registration.
- c) Any act or omission of an *employer* whose registration as a *self-insured employer* has ceased that is within the scope of the continued delegation will be taken for the purposes of the *Act*, to be the act or omission of a *self-insured employer*.

7.3. Assumption of liabilities

- a) As insurer of last resort, pursuant to s167 of the *Act*, *ReturnToWorkSA* must undertake the liabilities of any *self-insured employer* that ceases to be registered as a *self-insured employer* if the *employer*:
 - (i) becomes insolvent; or
 - (ii) ceases to carry on business in the State and fails to make provision that *ReturnToWorkSA* considers adequate for dealing with claims, liabilities and responsibilities relating to work injuries arising from employment during the period of *self-insured employer* registration.

7.4. Valuation of capitalised liabilities

- a) Where *ReturnToWorkSA* determines to undertake the outstanding liabilities of any *self-insured employer*, *ReturnToWorkSA* will:
 - (i) determine the process for valuation of claims at the time claims liability is assumed by *ReturnToWorkSA*; and
 - (ii) appoint or approve an actuary to assess the value of the outstanding claims liability.

7.5. Run off of claims

- a) Where *ReturnToWorkSA* is satisfied of the ability of the *employer* to continue to manage and bear financial responsibility for any claims by its *workers* in relation to *work injuries*, it may allow the former *self-insured employer* to retain responsibility for such liabilities for such a period as *ReturnToWorkSA* determines appropriate (a 'run off period').

- b) In circumstances where *ReturnToWorkSA* has decided not to undertake all of the liabilities of the former *self-insured employer* and to continue the delegation of powers and discretions to the former *self-insured employer* for a period, *ReturnToWorkSA* may require the former *self-insured employer* to enter into an agreement with *ReturnToWorkSA*.
- c) The former *self-insured employer* must maintain compliance with the *Act*, *Regulations*, and *Injury Management Standards* during the run-off period.
- d) *ReturnToWorkSA* may terminate the run off if *ReturnToWorkSA* considers there are substantive grounds for doing so.
- e) Upon cessation of the run off period, *ReturnToWorkSA* will approve or appoint an actuary to assess the value of the outstanding claims liability at that time, in order to calculate the capitalised sum (if any) the *employer* must pay to *ReturnToWorkSA*.

7.6. Treatment of Claim files on cessation of self-insurance

- a) On cessation of self-insurance and transfer of liabilities to the *ReturnToWorkSA* under section 167 of the *Act*, the claim files in relation to the claims that have been assumed by *ReturnToWorkSA* must be provided to *ReturnToWorkSA* before the financial guarantee document is released to the *employer*.
- b) Claim files required will include both closed and open files but will not extend to any files that have been properly destroyed under the provisions of *Regulations* relating to claim file retention.



The information in this publication is compiled by *ReturnToWorkSA*. The data and facts referred to are correct at the time of publishing and provided as general information only. It is not intended that any opinion as to the meaning of legislation referred to is to be relied upon by readers. You should seek independent or legal advice as to any specific issues that are relevant to you, your workplace or organisation.

© *ReturnToWorkSA*, 2015



Government
of South Australia



ReturnToWorkSA

Enquiries: phone 13 18 55

400 King William Street

Adelaide SA 5000

Fax: (08) 8233 2466

info@rtwsa.com

www.rtwsa.com

The following free information support services are available:

If you are deaf or have a hearing or speech impairment you can call ReturnToWorkSA on **13 18 55** through the National Relay Service (NRS) **www.relayservice.gov.au**.

For languages other than English call the Interpreting and Translating Centre on **1800 280 203** and ask for an interpreter to call ReturnToWorkSA on **13 18 55**.

For braille, audio or e-text of the information in this brochure call **13 18 55**.



**Government
of South Australia**