This learning product has been developed for Technip by CSTC Pty Ltd.

ASSESSMENT FOR BSBWHS407A

Student name	Watchara Limpinijkul
Date of assessment submission	24/11/2015

Trainer/Assessor's name	
Date of assessment marking	Click here to enter a date.
Outcome for unit	☐ Competent ☐ Not Yet Competent

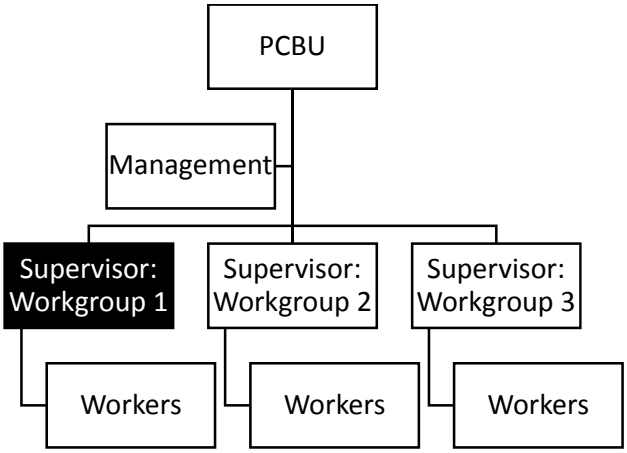
TASK INSTRUCTIONS

- The assessment for this unit of competency consists of the following:
  - **A series of activities:** Some of these activities will require you to provide a response within this document, others will require you to gather evidence to demonstrate your knowledge and skills (overview below)
  - **Quiz:** You will be required to complete a series of questions to demonstrate your knowledge and skills.
  - **Third Party Report:** You will be required to have a third party attest to your knowledge and skills and sign a report to this effect.
- At times, you will be provided with a specific business context to which you must respond, otherwise it is anticipated that you will use a workplace of your choosing (your own, or hypothetical) to provide the context to the task.
- At all times, the responses in your assessment must reference **Australian** (Queensland or Federal) documentation, including legislation, regulations, codes of practice, standards and guidance publications.

ACTIVITY OVERVIEW	REQUIRED FOR SUBMISSION
1. Processing claims	• Workbook response (below)
2. Assisting with managing claims	• Workbook response (below)
3. Design of return-to-work program	• Workbook response (below)
4. Facilitating consultation	• Workbook response (below)
5. Addressing breaches	• Workbook response (below)
6. Evaluation of programs	• Workbook response (below)

ACTIVITIES

For the following activities, you will assume the role of a workgroup supervisor in a workplace of your choosing (see example organisational chart below).



Name a workplace and workgroup that you are (or hypothetically are) the supervisor for:

Name of workplace	Technip
Workgroup	Thailand

Also, identify a (hypothetical) worker who is injured and seeking compensation. Their injury must be serious enough to prevent them from returning to the same duties upon their return to work:

Role of injured party	QC Inspector
Describe their pre-injury duties	Represented on Site for QC inspection for Re-coating Pipeline
Describe injury that has been sustained by worker	He've got infection from Mycobacterium tuberculosis while he was working on Site (This is only one case I can use becouse of there is no rerious injury accident in Technip Thailand so far)as this result he was admitted in the hospital for 3 weeks and then he was giving an alternative position from QC Inspection at site to Pipine Engineer working in the Office as he not 100 % re-covered from the desease .

ACTIVITY 1

For each of the categories below (i.e. processing claims, notifying rehabilitation provider and preparing forms/reports), identify and explain the requirements with respect to workers' compensation claims:

a) Organisational policy
b) Organisational procedure
c) Legal / Workers' compensation insurance requirement

	Processing claims	**Notifying rehabilitation provider**	**Forms / Reports**
Policy	The Processing claims policy : Processing clains shall comply with Worker's Compensation and Injury Management Act 1981. The IMC will administer the workers' Compensation Claim Process as per Injury Management Procedure	Notifying rehabilitation provider Policy : Notification of the claimant's referral or admission to the rehabilitation service should be directed to the identified CTP insurer as early as possible. This may be done in writing or by phone call to the insurer. A copy of the referral is to be sent to the insurer.	1. Under the Act (defined below) an employer must obtain from an approved insurance office a Policy of insurance for the full amount of its liability to pay compensation under the Act, or Damages to any Worker employed by it. 2. You have applied in writing to be covered by this Policy upon payment of an agreed premium. 3. We have therefore agreed to issue this Policy to cover you for the Policy Period
Procedure	Submitting a workers compensation claim As soon as you are aware that a worker has suffered an injury, particularly where there may be lost time from work, the worker must seek medical aid and obtain a certificate issued by a duly qualified registered medical practitioner. A worker is unable to receive weekly payment of wages unless supported by a medical certificate certifying total/partial incapacity. Accidents of a very serious nature should be reported to GIO immediately so that we can arrange for investigations to be undertaken, if necessary.	Notifying rehabilitation Procedures : 1. Initial rehabilitation assessment procedures 2. Submission of a rehabilitation plan 3. Approval of rehabilitation plan 4. Submission of reports 5. Notification of discharge / program completion	1.Claim forms As the employer, you are required to complete the Employer Detail Section of the Workers Compensation Claim Form(Form 2B), as well as the GIO Employer's Report of Injury Form. The Worker is required to complete the Worker Details section of the Workers Compensation Claim Form (Form 2B). In the event of the worker's injury arising from a motor vehicle accident, please ensure the worker completes the Claim Form for Injury on the Journey. Forward the Workers Compensation Claim Form (Form 2B), the

	You should contact GIO if you are unsure what to do. If a claim is to be lodged, you must complete a Workers Compensation Claim Form (Form 2B), and the GIO Employer's Report of Injury Form. These are available from GIO. GIO recommends the injured worker sign the Injured Worker Information Consent Form. This will enable an injury management representative from the employer or GIO to consult with the injured worker and the treating practitioner, regarding initiating a return to work plan or referral to specialist vocational rehabilitation services.		Employer's Report of Injury Form and the First Medical Certificate, along with any other correspondence immediately to GIO. The Workers Compensation and Injury Management Act 1981 requires you to do this within five working days (5) of the Form 2B and the medical certificate being given to you by the worker. All forms must be forwarded to GIO as a matter of priority to assist with the return to work process and avoid unnecessary delays with claims management. Fines in the amount of $1000 (per breach) may be imposed by WorkCover WA if claims are not lodged within the above time frames. 2. Witness form If there have been any witnesses to a worker's injury, GIO recommends that the witness complete the Witness Form. This will assist our claims personnel to determine liability with regard to the claim.
Legal / Workers' compensation insurance requirement	Worker's Compensation and Injury Management Act 1981 : Part 3-Division 1-8, Part 5- Division 1-4, and Part 10 - Insurance Division 1 - Liability of Employers and Insurers.(160. Employer to obtain insurance. 161. Approvals. 162. The State Government Insurance Office sole insurer against certain industrial diseases.	Worker's Compensation and Injury Management Act 1981 : Part 3-Division 1-8, Part 5- Division 1-4, and Part 10 - Insurance Division 1 - Liability of Employers and Insurers.(160. Employer to obtain insurance. 161. Approvals. 162. The State Government Insurance Office sole insurer against certain industrial diseases.	Worker's Compensation and Injury Management Act 1981 : Part 3-Division 1-8, Part 5- Division 1-4, and Part 10 - Insurance Division 1 - Liability of Employers and Insurers.(160. Employer to obtain insurance. 161. Approvals. 162. The State Government Insurance Office sole insurer against certain industrial diseases.

	163. Payment of industrial disease premium and issue of policy. 164. Exempt employer. 165. Review of exemptions. 166. Other cancellations. 167. Effect of cessation of exemption. 168. Cessation of exemption. 169. Forms of policy. 170. Penalty-uninsured worker. 171. Insurance offices to furnish certain statements. 172. Minister may authorize persons to inquire if employers have obtained insurance. 173. Workers' rights against insurer. 174. Payment to worker from General Fund.)	163. Payment of industrial disease premium and issue of policy. 164. Exempt employer. 165. Review of exemptions. 166. Other cancellations. 167. Effect of cessation of exemption. 168. Cessation of exemption. 169. Forms of policy. 170. Penalty-uninsured worker. 171. Insurance offices to furnish certain statements. 172. Minister may authorize persons to inquire if employers have obtained insurance. 173. Workers' rights against insurer. 174. Payment to worker from General Fund.	163. Payment of industrial disease premium and issue of policy. 164. Exempt employer. 165. Review of exemptions. 166. Other cancellations. 167. Effect of cessation of exemption. 168. Cessation of exemption. 169. Forms of policy. 170. Penalty-uninsured worker. 171. Insurance offices to furnish certain statements. 172. Minister may authorize persons to inquire if employers have obtained insurance. 173. Workers' rights against insurer. 174. Payment to worker from General Fund

Outcome for Activity 1	☐ Satisfactory ☐ Not satisfactory
Trainer/Assessor comments	

ACTIVITY 2
Explain your role, as a workgroup supervisor, with respect to the following tasks: a) Analysis of claim b) Advising the claimant as to whether their claim has been accepted c) Estimating the projected period of absence from work d) Helping ensure arrangements are made in the work team to deal with absence (where rehabilitation assistance is required)

	Explanation of your role
a)	- Identify the nature of the illness and injury - ensure that all accidents shall be reported according the policies and procedures - Perfrom risk assessment to analyse the incident that resulted in a worker being unable to undertake his/her job role fully. - Prepare reports according to organisational policies, relevant legal and insurance requirement - Acquire relevent information on the extent of the injured worker's injury/illness, the required treatment/rehabilitation regime, medical and work resttriction and potential prognosos to better plan the timing of a return-to-work program
b)	Ensure that the process of workers'compensation claim is according to organisational policies, procedures, all relevent legal and workers' compensation insurance requirement - Make sure the injured worker to complete all sections of the Worker's Claim Form - Make sure to complete the employer section of he Worker's Claim Form - Review the First Medical Certificate - Contact with the Approved Insurer to access the internal dispute resolution process - Send all nessasy documents to the Approved insurer within 3 days
c)	- Acquire relevent information on the extent of the injured worker's injury/illness, the required treatment/rehabilitation regime, medical and work resttriction and potential prognosos to better plan the timing of a return-to-work program - Explore potential suitable job tasks for the injured worker to ondertake, without discriminating the injured worker or disadvantaging co-workers. - Ensure that the physical as well as the psychological status of the injured worker are considered when planing the return-to-work program. - Ensure that any support required for a long term return-to-work program has been explored.
d)	- Ensure that the employer, the injured worker and the treating medical practitioner are have the same picture and accepted on a service delivery plan and receive regular information about the costs incuured and the anticipated costs of the worker's rehabilitation services. - Consult with the injured worker, all treating health practitioners and the WRP. Consult with the injured worker's Line Manager, on-site WHS representatives and any other personnel invoved with the provision of suitable duties - ensure that suitable job tasks should not aggravate the injured worker's injury/illness or cause new injuries.

Outcome for Activity 2	☐ Satisfactory ☐ Not satisfactory

Trainer/Assessor comments	

ACTIVITY 3
Referring to the injured worker you identified at the outset, elaborate on the following points: a) Identify the injured worker's existing skills, experience and capabilities b) Explain how the worker's job has been affected by their injury c) Explain how the worker's job should be redesigned, including reduced hours and alternative duties d) Identify retraining that is required, as the worker cannot return to pre-injury duties e) Describe the timeframes in which their return-to-work program will commence

	Summary
a)	A worker's existing skills, experience and capabilities can be acquired from follwing sources; - Human resourse record on employment history eg. resume, training record - Current/ past job role undertaken descriptions within the company - Line Managers' and/or Site Supervisors' input - Injured workers' input
b)	The worker's job has been affected by their injury as following conditions; - Wrong ergonomics position - Failure to consider the biomechanics of undertaking a job task e.g. positioning of a body part and potential resultant muscular fatigue - Failure to consider the frequency and duration of a job task - Failure to consider the force required to perfrom a job task - Failure to consider the physical, psychological, environmental hazards, risk within the return-to-work environment - Failure to consider support system for the injured worker during the return-to-work program
c)	The job redesigned should be considerred; - a basic understanding of ergonomics - the biomechanics of undertaking a job task e.g. positioning of a body part and potential resultant muscular fatigue - the frequency and duration of a job task - the force required to perfrom a job task - the physical, psychological, environmental hazards, risk within the return-to-work environment - support system for the injured worker during the return-to-work program A return-to-work program on reduced hours shall consider following items; - Can the reduced hours be accommodated within the business operation? - Can perposeful, productive job tasks be provided during those reduced hours? - Does it require a worker to change the shift roster in order to untertake a return-to-work program on reduce hours? - Is it economical to get the injuried worker into the workplace equates or exceeds the hours of work? Alternative duties shall be consider in case of a worker's job role cannot be modified to ensure safe and sustainable participation in a return-to-work program.
d)	Retraining required as the worker cannot return to pre-injury duties shall consider; - retraining will be conducted in-house or externally - Training needs of alternative or transitional duties to acquire the relevant skills and knowledge - Retaining is one option that can chnnel an injured worker's return-to-work program in two directions of emploment: orginal employer or new employer.

e)	The timeframes of the return-to-work program shall be considerred the fillowing; - The injured worker's medical retrictions and work capacity - Availability of suitable duties - The hours per shift and the number of days of work per week - The business operational needs - Require workplace modification, aids and appliances - Potential barriers to returnto work and possible solution.

Outcome for Activity 3	☐ Satisfactory ☐ Not satisfactory
Trainer/Assessor comments	

ACTIVITY 4
Explain how you, as a workgroup supervisor, plan and implement a rehabilitation or return-to-work program through: a) Facilitating consultation between rehabilitation provider and treating doctor (and other health professionals) b) Facilitating consultation between rehabilitation provider, managers and injured worker. c) Seeking advice from health and rehabilitation professionals d) Consulting with relevant managers about the return-to-work program e) Consulting with the injured party in establishing a rehabilitation or return-to-work program. f) Facilitating regular communication and feedback between the rehabilitation provider, supervising manager and the injured worker

	Explanation of your role
a)	- Ensure that any issue relating to the return-to-work program is highlighted immediately for issue resolution - Ensure that any modifcation to the return-to-work program is actioned without delay so as to ensure the helth and safety of the injured workers - Ensure that reasonable workplace support, aids and appliances are provided to the injured workers without undue delay - Any other workplace related matter eg. discrimination and harassment is addressed - Ensure that expexted tratment, projected period of incapacity, approimation of minimal functional capbility and potential stage of fuctional recovert are determined.
b)	- Ensure that the extent of the injury and the timimg for an injured worker to cover and commence a return-to-work program are determined and communicated to rehabilitation provider, manager and injured worker. - Ensure that job tasks identification for the return-to-work program and the length of time required for the return-to-work program are determined and communicated to rehabilitation provider, manager and injured worke - Ensure exploration of retraining requirements, if the injured worker were to attemp job tasks that were not previously undertaken.
c)	- Seeking advice on the diagnosis and pronosis of the work-related injury - Seeking advice on a medical certificate or other written notice - Sekking advice on work restrictions that may apply to the injured worker who will be attempting a return-to-work program.
d)	- Consulting about the injured worker's capacity for work - Consulting on reasonable workplace support, aids or modifiaction to assist in the return-to-work program - Consulting on proposed options for suitable duties.
e)	- Cousulting the injured worker on clear instruction of the return-to-work program. - Consulting on appropriate treament - Consulting on return to work support - Ensure the injured party understand how to comply with the current medical restrictions
f)	Organize the meeting between the rehabilitation provider, supervising manager and the injured worker to comminicate and get the feedback on following - How to comply with the current medical restrictions - Be undertaken in consultation with the injured worker and Line Manager - Injured worker's current skill level - worl trials - all potential hazard/risk associated with the job task and the return to work environment - determined retraining needs

Outcome for Activity 4	☐ Satisfactory ☐ Not satisfactory
Trainer/Assessor comments	

ACTIVITY 5

Describe a breach that could occur with respect to the return-to-work program.

Explain how you, as a workgroup supervisor, would (according to organisational policies, procedures and relevant legal and insurance requirements) undertake the following:

a) Identify and notify about breach to return-to-work program
b) Take remedial action for the breach
c) Modify the return-to-work program

Breach to program	Safety Breach

	Explanation of your role
a)	- Ensure that the injured worker are inducted the organisation's safety policies and procedures about return-to-work program and indentify/notify about breach to return-to-work program
b)	- Ensure that what remedial action was taken in the past are recorded - Ensure that the record on the remedial action taken are clear. - Ensure the remedial actions are proptly taken. - Ensure that the injured worker are aware and understand the remedial action to be taken.
c)	- Ensure that any recent amendment to the rester, return-to-work program are monitored and reported. - Ensure the injured workers are advised on the roster and return-to-work program - Ensure that the modify the return-to-work progarm is desiged to promote a safe and sustainable to work without discrimination. - Modify the return-to-work program shall consider following * Not return to work too early * Difficlty Travelling to work * Physically unsuitable job tasks * Hazardous return to work * Lack of Accommodation * Modified/Alternative/Transitional Work * Complicated health situations * Medication use problem * Worsening kealth or Re-injury

Outcome for Activity 5	☐ Satisfactory ☐ Not satisfactory

Trainer/Assessor comments	

ACTIVITY 6
Describe the process of evaluation for rehabilitation and return-to-work programs. a) Summarise the evaluation process you would undertake b) Explain how you would implement recommendations to improve the system c) Explain why having suitable rehabilitation and return-to-work is important for the worker, fellow workers and the employer

	Explanation of your role
a)	For the evaluation process we will perfrom ; 1. the commencement of rehabilitation/return-to-work- progrom 2. Follow-up with key stakeholders regrading progress 3. Issue resolution and development of new strategies 4. Update rehabilitation/return-to-work program and get endorsement on the program 5. Continue 1-4 for continuose improvement
b)	For the recommendations to improve the system, we will follow the simple following method - Preliminary 1. Identify what is the problem. 2. Decide to intervene. 3. Define purpose and timeline 4. Identify relevant expertise - Planning & Developemnt 5. Review theory, relevant data 6. Develop model 7. Develop evaluation design, measurement 8. Assess statistical power - Intervention 9. Measure baseline values of outcome and other variables 10. Measure variable after intervention - Analysis & Reporting 11. Quatitative and qualitative data analysis 12. Interpret results 13. Report
c)	The advantages of having suitable rehabilitation and return-to-work to an injured employee include: - showing the employee their contribution is valued by getting them safely back to work as soon as possible - limiting the possibility of long-term absence from the workplace that may give rise to other issues - reducing the adverse effects on co-workers due to the injured employee being absent - improving staff confidence and morale - ensuring management involvement in the injury management process - increasing the probability of a sustainable return to work - containing the direct costs of work related injury to both the employer and employee - reducing indirect costs such as lost productivity, recruitment and training for replacement staff.

Outcome for Activity 6	☐ Satisfactory ☐ Not satisfactory
Trainer/Assessor comments	

Outcome for On-line Quiz	☐ Satisfactory ☐ Not satisfactory
Trainer/Assessor comments	

THIRD PARTY REPORT

You are required to have a suitable third party to verify your ability to complete the following:

SKILLS	VERIFIED
1. Meet organisational policies and procedures, and all relevant legal and workers' compensation insurance requirements when:	
a) Processing workers' compensation claims.	☒
b) Notifying rehabilitation provider and claimant of outcomes.	☒
c) Analysing claims to identify the nature of the illness/injury and preparing reports.	☒
2. Implement a successful rehabilitation or return-to-work program by:	
a) Estimating projected period of absence from work and organising work team where rehabilitation assistance is required.	☒
b) Facilitating consultation between rehabilitation provider, doctors, managers and the injured worker.	☒

c) Redesigning job after documenting existing skills, noting required training and consulting with professionals (i.e. health and management) and the injured worker.	☒
d) Commencing the program within a timely fashion.	☒
3. Monitoring and evaluating a rehabilitation or return-to-work program by:	
a) Facilitating consultation and regular contact between rehabilitation provider, managers and the injured worker.	☒
b) Identifying, notifying and acting on breaches of return-to-work program	☒
c) Modifying return-to-work program, where required.	☒
d) Evaluating each rehabilitation or return-to-work program and implementing recommendations, where appropriate.	☒

Name of third party	Mr. Faezal Ibrahim
Role of third party (Confirm their suitability to sign report)	Corperate QHSES Manager
Date of report completion	Click here to enter a date.
Phone number of third party	+66 83 000 5747
Email address of third party	fibrahim@technip.com

Outcome for Third Party Report	☐ Satisfactory ☐ Not satisfactory
Trainer/Assessor comments	