

Evaluation of Transition Support

Supporting injured workers: Phase 2

The opinions and experiences of injured workers experiencing Transition Support.

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ACKNOWLEDGEMENTS

This Phase 2 report has been prepared for WorkSafe Victoria (WSV). It builds on the Phase 1 report completed in 2020. The Institute for Safety, Compensation and Recovery Research (ISCRR) wish to acknowledge the valuable input provided by injured workers.

Background

Transition Support is a WorkSafe Victoria initiative that supports injured workers when they no longer have an entitlement to benefits under the workers' compensation scheme. This tailored initiative is intended to inform workers about external services that can be used to assist them to manage their finances, health and social needs independently of the scheme.

Objectives

The aim of this evaluation was to understand how the Transition Support initiative is being implemented and how it may be improved for supporting injured workers whose income payments are being ceased.

The research objectives were:

- 1. To determine if workers felt supported by their agents because of Transition Support and the extent the information provided was tailored to them
- 2. To explore if and how injured workers utilised the Transition Support materials, the helpfulness of the materials and how they believe these materials can be improved
- 3. To determine if, as a result of participating in Transition Support, injured workers felt they understood the second entitlement review process and were able to prepare for their weekly income payments ceasing.

Approach

To address the research objectives a mixed methods approach was implemented. This consisted of an anonymous online survey sent to 232 injured workers (n=49 respondents), and phone interviews with injured workers from the survey who volunteered to be contacted for further information (n=20). All injured workers involved in this research had completed the Transition Support period and their income payments had ceased.

Key Findings

Support and Communication

Case Manager Relationships

Almost 1 in 5 (19%) injured workers thought their Case Manager was supportive, appreciating their active listening skills and proactive support. Some Case Managers informed injured workers about available services and how to access them, as well as developing a personalised recovery and return to work plan. This enabled them to navigate the WorkCover process and enhanced their recovery journey.

The majority of workers did not feel supported by their Case Manager, identifying lack of Case Manager continuity and communication as a primary reason for disengagement. Injured workers felt insignificant, and reported that repeated re-telling of the injury event and case history retraumatised them and had a detrimental effect on their recovery.

Injured worker resentment and disengagement associated with negative Case Manager experiences hindered their receptiveness and uptake of the Transition Support materials. Therefore, any valuable

information contained within these resource materials was overlooked, with many injured workers reporting not even looking at the materials.

Suggestions to improve Case Manager support

- Case Manager training
- Case Manager continuity
- Active support for injured worker
- Balance obligation to injured worker and agent
- Provision of information on WorkCover process and milestones

Utilisation of Transition Support materials

One in five injured workers who completed the survey said that they knew about the Transition support materials. Many injured workers thought the materials were generic and not tailored to their needs.

Fact Sheets

- Fourteen of 49 injured workers had read the fact sheets
- Injured workers reported they were typically delivered by mail or email with no supporting discussion from Case Managers
- The most read was "Looking after your mental health"

Ask Izzy

- 89% of surveyed injured workers reported that they had not heard of Ask Izzy
- Of those that used it, two injured workers used it to access urgent food parcels and one used it to access a second-hand bed

Suggestions to improve Transition Support materials

- Tailor the information to match individual injured worker circumstances
- Provide more in-depth information on topics
- More personalized delivery of the materials by Case Managers
- Supporting injured workers to understand the materials provided

Understanding of second entitlement process and preparation for income payments ceasing

Understanding the second entitlement period

Most injured workers did not understand the second entitlement review process. Just over one in five (21%) thought that the Transition Support information they received through their Case Mangers had helped. Many injured workers had no or minimal contact from their Case Manger during this time. Injured workers felt overwhelmed navigating the second entitlement process and reported being distressed by it.

Preparedness for income payments ending

Just under one in five (19%) injured workers thought that the Transition Support information they received through their Case Mangers had helped them with preparing for their income payments ending. Having no income payments was very distressing for injured workers to process. Resentment regarding the income payments ending decision and lack of Case Manager communication hindered injured worker preparation for income payments ending.

Suggestions from injured workers to improve Transition Support included:

- Case Manager consistency
- Earlier notification
- Regular updates regarding timelines and pending milestones
- Tailor information to suit injured workers e.g. language, cognitive and mental health capacity
- · Provide information about ongoing entitlements e.g. medical and other treatment costs
- Provide more details regarding second entitlement adverse decision basis
- · Accessibility of funding for injured worker re-training
- Balance potential conflict of interest between insurance agencies and injured worker support

Considerations Fact Sheets Ask Izzy Case Management Promote the utility of these to ✓ Promote the utility of Ask Izzy ✓ Keep up to date with injured injured workers worker client's case history ✓ Ensure injured workers have Ensure the fact sheets are ✓ Tailor choice of materials to the capacity and resources to complimented with a phone access online resources injured workers call discussion ✓ Employ active listening to Assist injured workers to ✓ Only distribute Fact Sheets support client centric case navigate Ask Izzy that are relevant to the injured management Translate Ask Izzy into more worker ✓ Timely follow up of injured languages ✓ Consider other forms of workers queries and information dissemination communication Be sensitive to literacy Seek advice from supervisors limitations when necessary Provide in relevant languages O ISCRR

BACKGROUND

Transition Support is a WorkSafe Victoria (WSV) initiative to support injured workers as they transition to having their workers' compensation entitlements end. This initiative was designed with the intent of informing workers about external services available to assist them with managing finances, health, and social needs, independently of the workers compensation scheme.

The WorkCover second entitlement period commences with a review which includes an independent medical examination, assessments with occupational rehabilitation providers and information from the injured worker's treating healthcare practitioner. Agents then use this information to assess an injured worker's capacity in order to determine whether their weekly compensation income payments will cease at 130 weeks into their claim. An injured worker is only entitled to income payments after 130 weeks if they are assessed as having no capacity to work at that time. If the review deems that an injured worker has the capacity to work a Case Manager notifies them of the outcome. This notification marks their transition to income payments ceasing and should occur around 117 weeks into their claim, approximately three months prior to their income payments ceasing at 130 weeks (Figure 1).



Fig 1. Transition Support timeline

The Transition Support program includes a suite of tools for Case Managers to use to support injured workers. These tools include verbal communication with the Case Manager, seven Fact Sheets, a Frequently Asked Questions (FAQ) sheet, and an online search tool (Ask Izzy). In addition to distributing these resources to injured workers, Case Managers are instructed to provide active support to assist clients during their transition through the period of their income payments ending.

Transition Support was piloted with one agent in 2018, and in 2019 it was expanded to all five agents. It currently operates with four agents.

Case Manager communication protocols

WSV have established protocols for Agent/Case Manager compliance regarding the delivery of Transition Support services. These are documented in the Transition Support Business Rules 2019-20 (WorkSafe, 2019) and outlined below.

70 - 80 weeks

Injured workers are notified that they are required to undertake a second entitlement review (legislated requirement). The Case Manager (Agent) is required to make a minimum of two attempts to phone the injured worker and if unsuccessful send a letter or email. A copy of the Second Entitlement Frequently Asked Questions sheet should also be sent.

110 - 117 weeks

If the second entitlement review results in a decision to terminate income payments, the worker should be notified by phone (documented) and also include one of the following:

Option 1

"At the time of advising the worker of the adverse decision the worker must be introduced to Transition Support options. The Agent must send any of the Transition Support information sheets that are specific to the workers current situation. The Case Manager should utilise 'Ask Izzy' for more tailored support services where appropriate and also introduce the worker to Ask Izzy.

Option 2

The Agent may decide to contact the worker a week after the adverse decision contact to advise of Transition Support, instead of providing the information in the one contact. At the time of advising the worker of the adverse decision, the Agent should advise that another call will be scheduled in one week to discuss Transition Support. This call must be made in the timeframe specified with the worker in the adverse decision contact. The call requirements are the same as outlined in Option 1"

Additional follow up contact requirements

Following the initial Transition Support introduction call, a follow up call must be made within six weeks of the second entitlement review notification. The purpose of the call is the ensure the worker understands the available supports, to identify if any further supports are needed, establish goals and make a plan. If appropriate, a follow up call can be scheduled near the end of their 13-week notice period, to ensure the injured worker has appropriate supports in place to successfully transition from the scheme.

PURPOSE AND APPROACH

The aim of this evaluation was to understand how the Transition Support initiative has been implemented, including any barriers to its intended use and any recommendations to enhance its delivery in supporting injured workers preparing for their income payments ceasing.

Research questions

The research objectives were:

- 1. To determine if workers felt supported by their agents because of Transition Support and the extent the information provided was tailored to them
- 2. To explore if and how injured workers utilised the Transition Support materials, the helpfulness of the materials and how they believe these materials can be improved
- 3. To determine if, as a result of participating in Transition Support, injured workers felt they understood the second entitlement review process and were able to prepare for their weekly income payments ceasing.

This report will focus on these objectives from the perspective of the injured worker. The first two objectives were explored from the perspective of the Case Manager in the Phase 1 report, delivered in July 2020 (ISCRR, 2020). The research in this report employed a mixed methods design, including a survey of injured workers, who were then invited to also participate in a semi-structured phone interview.

Project timeline postponement

Originally this evaluation was scheduled to be conducted in 2020. However, the COVID-19 Omnibus (Emergency Measures) Act 2020 extended the payment dates for injured workers. The Act changed the claims experience and thus could have affected the experience of Transition Support and influenced survey responses. To accommodate these potential confounds, Phase 2 of the research was delayed until the Act expired. This allowed a sufficient number of injured workers to have: received their payment-ceasing letters; passed the 130-week mark resulting in their income payments ceasing; and, experienced engagement with Transition Support.

Survey

A survey was designed for this project to gather information about injured workers' experience in relation to the Transition Support process. Feedback was elicited from injured workers who had been through this process and whose regular income payments had ceased between January 2020 and July 2021. The questions focused on the main components of the Transition Support process namely: Case Manager(s) communication and support during this transition period; injured workers' awareness and utilisation of the Fact Sheets and Ask Izzy search tool; and injured workers' perceived experiences of how these processes supported them during this transition process and prepared them for their WorkCover income payment cessation and where applicable return to work (RTW).

The survey was reviewed and piloted amongst ISCRR and WorkSafe staff, as well as a small sample of 15 injured worker participants. WorkSafe provided ISCRR with an extract containing the contact details of injured workers who:

- 1) had completed the Transition Support process; and
- 2) whose final regular income payments had ceased between January 2020 and July 2021 (n=232)

The survey completion time ranged between 10 to 30 minutes dependent on the number of Transition Support resources they had utilised and if they included any text-based suggestions or feedback. Survey participants had the opportunity to enter into a prize draw ($10 \times 100 = 1$

The online survey was distributed via a participation invitation email to 232 injured workers in August 2021. A total of 49 participants completed the survey, representing a 21% response rate. Of those who did not complete the survey, 10 had opened the online survey link but excluded based on failing to provide consent or not satisfying the selection criteria.

Interviews

Twenty two injured workers who had completed the survey expressed interest in volunteering for a phone interview. A total of 20 participated in a semi-structured phone interview and two did not respond to attempts to schedule an interview.

The themes in the interview were similar to those of the survey but provided an opportunity for the injured workers to elaborate on their experiences and for the research team to gain further insight beyond the survey responses. The interviews ranged from five to 50 minutes (average 15 mins) in duration and were recorded upon consent. The interviews were transcribed verbatim and thematic analysis undertaken.

Ethics

This research was approved by Monash University Human Research Ethics committee on March 9, 2021 under project code 23814. All participants' identities are confidential, and their quotes de-identified in the report.

FINDINGS: SUPPORT AND COMMUNICATION

In this chapter the evaluation findings associated with the first research objective are reported:

Research Objective 1: To determine if workers felt supported by their agents because of Transition Support and the extent the information provided was tailored to them.

Survey cohort

Of the 49 survey respondents, 18 were male and 31 female, with an age range between 18 and 79. The most common age group was 55-59 years (22%) and 69% were aged 50 years or older. The most common education level was a technical certificate, such as TAFE or white card certification (43%).

Return to work status

Approximately half (49%) of the participants had returned to work, and a similar proportion (51%) currently not working. Of those who had not returned to work, 64% reported "planning" or "wanting to return to work but still unable", while 24% reported "not planning to return to work" or being "permanently unable to work". It is worth noting that the majority (78%) had not yet recovered, reporting their recovery rate as "a little" (37%), "not much at all" (33%) or "not at all" (8%). The majority had also undergone Transition Support fairly recently having received their final income support payments in May/June 2021 (76%), two to three months prior to participating in this research.

Overall 80% of participants had made attempts to return to work (2-3 attempts 27%, 4 or more attempts 29%), with only ten participants (20%) not having made any attempts.

Of those who were currently working, half had returned to both a different employer and industry than prior to their injury. Many of the injured workers reported currently facing financial difficulties, with 72% reporting being unsatisfied with their current financial situation. This was reflected in the responses identifying that during the last 12 months 37% had borrowed money from family or friends and 31% reported not being able to pay an amenity bill on time. Further results from the financial related survey questions are presented in Appendix A.

Level of English

To gain an indication of an injured worker's ability to navigate the WorkCover process and access support where necessary, participants were asked about their level of English comprehension. The majority (96%) reported a 'good' (above average) level, the majority (78%) also reported feeling comfortable about asking for support when needed. These findings indicated that, for the majority of these injured worker participants, there were no obvious English language barriers that would have hindered their ability to comprehend the second entitlement process and ask for support from their Case Managers.

Agents

Injured workers from all five agents participated in the survey. One third of the injured workers had their claims managed through Gallagher Bassett, a quarter through Allianz and the remaining through the other three agents (Figure 2).

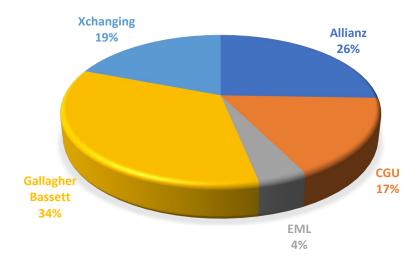


Fig 2. Agents of injured workers surveyed (n=47)

Formal communication from Case Managers

The research questions examined how the second entitlement protocols that Agents and Case Managers are required to follow aligned with the injured worker experiences. This following section outlines the injured workers' responses to these questions.

Notification about income payments ceasing

More than half of the injured workers (53%) were first notified about the 130 week payment ceasing schedule by their Case Managers (phone 33%, email 20%). About one-third were notified through the notification letter (35%), while 6% reported not being notified. Of the 26 injured workers initially notified by their Case Manager, almost all (92%) recalled also later receiving a notification letter. Some injured workers were pre-advised about the payment ceasing time frame, with Case Managers explaining it to them 'several months' (29%) or a 'short time' (12%) before they received their notification letter. Other Case Managers raised it with clients after they had received the letter (22%). However, 16% reported that their Case Manager had not discussed their income payments ceasing with them.

I would've liked a call before I got the letter because it came without any support ... so I was a little bit surprised.

Second Entitlement Frequently Asked Question sheet

Case Managers are required to provide injured workers with a Second Entitlement Frequently Asked Questions (FAQ) sheet at around 70 weeks. When asked about this, 20% of injured workers reported that they received this FAQ sheet, 41% said they did not and 39% could not recall.

Second entitlement review notification letter

Comprehension of the notification letter

Of the 24 injured workers who recalled receiving a notification letter, 60% said they 'fully understood' the letter and that their income payments were coming to an end. However, 40% reported understanding only 'a little' or 'not much'. A total of 18% who read the letter found it confusing. Regarding the utility of the letter, 33% found the letter to be 'helpful' or 'very helpful', 42% found it 'neither helpful nor unhelpful', and 25% thought the information contained was 'unhelpful'.

Letter content

The injured workers were then presented with four descriptive words (professional, supportive, sincere, confusing) and asked which they thought reflected their perception of the letter content. Forty three percent thought the letter was confusing, 30% professional, 4% sincere and 17% other, which included "cold" and "non-supportive". A common sentiment in the interviews was that the letter was impersonal.

All I got was a letter saying I was coming up to the 117-week review, blah, blah, blah. I had to go to do an IME, which is what I did. Then I got the letter to say that after 130 weeks, my payments would cease, and that was about all the correspondence I got. That was just it, I got the letter ... the wording was fine, it was just standard computer-generated letter, so there was nothing personal in it...

They did send me the letter saying that my payments would cease; an email, and probably a hard copy letter, as well. But that's it... and the generic articles, generic fact sheets.

Distress about information

For some injured workers, their distress associated with WorkCover paperwork and requirements had become overwhelming.

I have PTSD, off work almost 3 years. I can't return to professional career. Anxiety, lost friends and family as I isolated myself due to sustained, long term trauma experiences at workplace. When someone is still on WorkCover after this long and lost so much, you're obviously not thinking clearly or at your usual capacity. I would often be reduced to tears at the sheer notification of an email arriving from WorkSafe or a call on my screen from them.

Suggestions regarding letter content

Injured workers were invited to provide suggestions on how WorkSafe could improve the formal letter notification process.

Responses included providing more specific details about what the decision to cease their income payments had been based on and also about the decision appeals process.

A better explanation other than legislation says "we can" and having no consideration of my circumstances.

Barriers regarding the information being difficult to understand for those with English language limitations or injury related concentration and comprehension issues were raised, with suggestions to use plain language in correspondence. Even though the majority of survey participants responded that their level of English comprehension was 'good', many still suggested to simplify the language in the notification letter.

Having a better explanation, friendlier English for people to understand.

It needs to be more basic. There is so much information that it becomes confusing, especially for someone who is in pain and on a lot of pain medications. I also believe all Case Managers should be fully trained, so they can follow up and answer any questions.

Degree of Case Manager formal communication

Injured workers reported experiencing various degrees of Case Manager communication across the second entitlement period. The most common communication mode was by phone, with 38% receiving one phone call during their Transition Support period and 29% receiving two or more. For others the communication mode was email with 4% receiving one email and 4% receiving two or more. However, 16% of the injured workers reported not receiving any communication from their Case Manager during the Transition Support period. Only 8% could recall receiving the recommended Case Manager follow-up call at the end of their 13-week notice period.

Lack of information

Several interview responses indicated that injured workers did not feel their Case Manager had provided them with sufficient information across the Transition Support period.

There was no support. There was no information. It just come to an end.

I was told that my payments were going to finish soon. So I asked a question like when is that going to happen – what exact date is that going to happen. And they didn't get back to me... I found out because I didn't get paid one week. I'm, "Oh, I think this is when my payments finish."

Relationship with Case Managers

The following section explores injured worker accounts of their relationships and interactions with Case Managers during their Transition Support period. It is worth noting that some of the issues identified may be more appropriately attributed to the agents in which the Case Managers are employed. Examples of these issues include agent staffing levels, turnover and training, as well as time allocation for injured worker caseloads and client inquiry follow-up.

In the survey injured workers were asked "How supportive do you feel your Case Manager was during your transition to payments ending?". As shown in Figure 3, one-fifth (21%) of injured workers felt their Case Manager was supportive across this Transition Support period, with just over half (56%) feeling they were unsupportive.

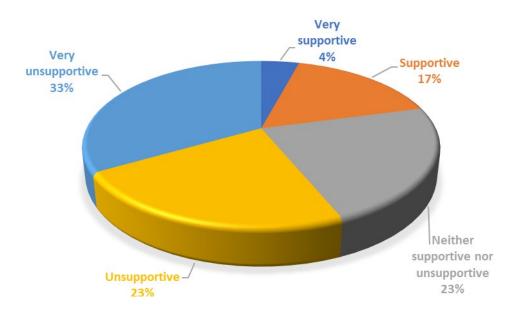


Fig 3. Support from Case Managers across Transition Support period

Similar responses were reported in the interviews. When asked about Case Manager support and assistance across this process many interviewees gave a direct "no support" response.

Supportive Case Manager relationships

This section explores injured worker accounts of positive or supportive relationships and interactions with Case Managers during their Transition Support period.

The following quote provides an example of how an injured worker, who is very happily employed in a new career, attributes this to receiving positive Case Manager support.

Time. Any time that I spoke with them, they were not otherwise occupied, they were focused. It's a major issue. I never felt like I was put through the mill.... the Case Managers gave me time and empathy. They knew my case, or they'd talk it through with me. And it wasn't talking through the experiences of what had happened (i.e. not having to recall their injury event) ... Thinking about it, they never sounded preoccupied. I would be on the phone for 45 minutes on occasion ... but now look at where I am because of what [agent name] have done in supporting me in my case ... I had the Case Managers, at any turn of the thing if I felt as though I needed to talk to my Case Manager – If I didn't get them, I'd leave a message, they'd call back et cetera. It was never a sense of needing to go looking for information.

The degree of support provided by Case Managers was a dominant theme across most of the interviews. Injured workers who reported a positive or supportive experience with a Case Manager conveyed appreciation and provided accounts of how this support enhanced their WorkCover experience and recovery journey.

Active listening

When asked about what constituted the positive aspects of Case Manager relationships, it was the basic client supports that were most valued, such as active listening. Injured workers talked about just being heard, having a voice in their recovery journey.

She listened to me. I didn't have to chase her all the time.

There was an authenticity about his interaction. There was a sense that he had and made time for that conversation. He had these skills in active listening and I guess there are things that I'm a little bit sensitive to because I'm aware of them, but he would do the thing like repeat what you said to ensure that he understood it. He'd say, "So let me make sure I've got this clear. Am I hearing you correctly? Are you saying that, da, da, da, da?" So, there's a sense of ensuring that he understood.

Active support

Injured workers talked about the importance of Case Mangers playing an active role in their case, rather than them having to make numerous attempts to contact their Case Manager and not having their call returned. One injured worker had very positive experiences across their transition period and when asked what the contributing factors were, they attributed it to their Case Manager taking time to talk with them about their personal recovery, what was occurring, and actively assisting them with identifying their options.

I would be on the phone with him for half an hour, an hour sometimes, and it was fabulous. He gave time, and somehow, he was able to navigate the people within my organisation, he was able to refer to them by name sufficiently enough that gave me confidence that I knew, that he knew, what he was talking about. - Injured worker 16

Injured workers appreciated this active support from Case Managers with navigating the WorkCover process. This personal approach was reassuring and trust building in the injured worker/Case Manager relationship.

We had a great relationship. She got the ball rolling, got my payments, got my backpay for that five months ... she was fantastic.

Once she's got to know me she was like, "Oh, you know," – she'd actually ring up and say, "Oh, this wasn't filled in properly." Or, "That's not working." Or, "How can I help you?" Or whatever. So she followed up on stuff.

She was actually quite good. I said, "look, I don't understand all this. This is ridiculous." She said, "yeah, I realise that." She said, "that's why I've decided to give you a call." So she was quite good — she knew I was very confused.

There was a support plan in place... I was approved to do a career transition ... So, there was that time I was given to actually study and to learn.

Non-supportive Case Manager relationships

The following section explores injured worker accounts of negative or non-supportive relationships and interactions with Case Managers, during their Transition Support period.

Injured workers who reported a negative or non-supportive experience with a Case Manager conveyed resentment and gave accounts of how this lack of support had hindered their WorkCover experience and recovery journey.

Case manager turnover

Injured workers were asked to quantify the number of Case Managers they had, from the time of second entitlement review process notification (~70 weeks) until their income payments ended, or they ended contact with WorkSafe. The majority of injured workers (62%) reported having four or more Case Managers across this 60 week time frame, with only 9% having one Case Manager. This result was similar irrespective of the agent involved.

Those who took part in the interviews reported having an average of six Case Managers across their transition period, with reports of up to ten. Experiences associated with a high Case Manager turnover and/or poorly communicated Case Manager reassignment, was the most commonly reported factor in injured worker accounts of negative or unsupportive Case Manager relationships.

I didn't even know I had a Case Manager for six months and I pretty much still don't know if I've got a Case Manager. I've just been hunting someone down to see if I have a Case Manager.

What else made it difficult was the constant change of caseworkers so that by the time I got to that hundred and whatever it was weeks, I didn't know who was my Caseworker anymore. So, I'd get an email, I'd go, "Is this email coming from who? And who do I contact to get any follow-up information about this?" So, that was another thing that was difficult.

To be honest, my (last) Case Manager had hardly anything to do with me. The first one, she was grouse, but I had her for like probably 12 months or something. But I had heaps of Caseworkers. But the last one, I hardly even spoke to her. I couldn't tell you her name.

Due to the number of Case Managers injured workers had across their WorkCover claim period, even those who reported a positive Case Manager experience often also reported several negative Case Manager experiences.

Two of them pretty much didn't do anything and two of them were okay. And the last one up to ... probably a year ago, she was actually good and supported me.

I think off the top of my head, probably five or six [Case Managers]. Of those six, four were really, really good, one in the middle was like – I didn't correspond with her so much, but the last one, that's the one I remember because I didn't receive anything.

There were frequent reports of injured worker confusion associated with Case Manager turnover and lack of communication regarding the reassigned Case Manager. This resulted in injured workers being unsure about who was actually managing their case.

Well, I have had a lot of issues with not hearing from my Case Manager, and having no contact, pretty much, at all; like ringing and not getting phone calls back, emailing and not receiving emails, not knowing who my Case Manager is at the time.

At one point, I wasn't even told that a Case Manager wasn't my Case Manager anymore. I found out because I'd kept emailing and emailing and trying to contact my Case Manager, but not getting anything back, so I ended up ringing a manager and they said to me, "Well, they're actually not your Case Manager. We've got your new Case Manager's actually starting on Monday, we'll email you through her email address." And then I tried to contact her on the Tuesday, didn't receive anything back, and then I rang again on the Thursday and she's like, "Oh sorry, they hadn't hooked up my phone properly, I didn't receive any messages." It's just been a s..t-show.

Repetition of injury event and case history

Having to inform a new Case Manager about their WorkCover case and progress resulted in frustration for many injured workers. The requirement of having to recall and explain their history, especially their injury event, to each new Case Manager and/or staff from other organisations who were involved in their recovery, resulted in them being re-traumatised and in turn hindered their recovery process.

I had so many different Case Managers ... I had to repeat a lot of the information which I would've thought would've been on file. So, a lot of them didn't know what was happening, I found that very frustrating so I didn't find that supportive in any way. So, I think constant turnover of Case Managers was a concern. And maybe a handover so I didn't have to go through all the details again.

So you ring through, and you don't go to your Case Manager, you just go to whoever answers the phone. And then they will try and help you before even trying to transfer you through to your Case Manager, like they'll say, "Can I help you with something?" And you sort of say, "Well, I'd prefer to speak to my Case Manager," and they say, "Well, she's busy at the moment. Is there something I can help you with?" So you sit there, you explain something to them, and then they go, "Oh, I can't help you with that. I'll transfer you through to your worker." So by the time you get to your worker, you're explaining it the second time, but you don't get to your worker, you get an answering machine, and then you might get through to your worker 24 hours later.

Consequences associated with lack of Case Manager support

To gain further insight into non-supportive Case Manager relationships, injured workers were given the opportunity to elaborate on how these relationships affected them during their transition to income payments ceasing period.

Limited knowledge regarding process and resources

injured workers talked about how lack of support hindered their ability to understand how and where to access relevant information in relation to medical, psychological, financial and return to work support.

The only thing that's helpful is trying to find a job. But they never did that.

I was doing all the groundwork, you know contacting the doctor, and ringing and emailing back to say, "I can't get a doctor's report, what else can I do?" And there wasn't any support from them saying, "Don't worry about it, we'll email the doctor and get your report, or anything for you," there was nothing like that. I felt like I was backward and forward trying to sort it out with the doctor myself, and that I had no support from them.

I called and I called and I called, and they didn't do it to the point now, it's that bad that the hospital said to me, "Listen, do you reckon you can call and find out who the Case Worker is? Because we've been trying to chase it up and we can't." Like I've got a back injury. I'm still going to work and I'm tired. And I'm chasing up doing someone else's job.

I didn't get much help at all from anyone. It took me ages to apply for Centrelink and everything. I was without income for two months ... I went to Centrelink website to apply for it, and the list of paperwork that I needed was phenomenal and I had a breakdown over that.

A frequent observation within the interviews was how injured worker resentment, associated with negative Case Manager experiences, became a barrier to their openness and acceptance of the Transition Support materials. Therefore, any valuable information contained within these resource materials was overlooked, with many injured workers reporting having not even looked at the materials

Confusion about WorkCover process

Injured workers talked about confusion with the WorkCover process, this was exacerbated when receiving contradictory advice or review findings.

[The agent] says they can't help me because I haven't provided enough information. So I went back and I showed my doctor and physio ... because he's the one that supports me ... I got him to read it again. I said, "What do I do? I've sent through everything." He goes, "Oh, I'm just going to send it through again because that doesn't make sense." They're saying that it wasn't enough information that I sent. I gave them my whole year worth of payslips, I gave them a supporting letter from my doctor... Gave them everything they wanted and they're saying they haven't ... got it. I was going to send it through again. And now I just got a letter to say that ... "Well, we can't help you because you haven't given us enough information." No-one's called me. No-one's done anything for me. (19)

Exacerbated health issues

Some injured workers perceived that the lack of support from their Case Manager/Agent actually exacerbated their health issues along with their personal distress.

They cannot underestimate the impact of their transaction with a client, and how either detrimental or conversely proactive their interactions are to the health, the rebuilding of heath and the work health of their clients. They are critical. They are critical to it, because they're your point of contact. They're the ones who by the perception of the injured worker, they're the ones who hold ultimate control.

I'm on antidepressants now, because of all this. ... it's not just a case of, "Oh, he's got a shoulder injury," it goes a lot deeper ... and you can't get the help, because they don't approve the sessions [referring to psychologist sessions]. So, what do you turn to? You turn to throwing a rope over the rafter [referring to suicidal thoughts] ... It's people's lives, so it's huge.

Agent systematic issues

It is worth noting that several injured worker interviewees did not attribute lack of support to Case Manager attitudes but rather the system in which the Case Managers are employed.

Yes, they are very efficient. And they were nice people, don't get me wrong, but I felt that they were ticking boxes and that they really had limited resources to help me.... And I think that they were all doing their jobs, but I was just a number.

Don't worry about your system; worry about your people. So, [agent], my message to them would be look after your people so they can look after theirs.

I think it's more the management, upper management, the greed side of it that dictates they have to do that. It's insurance – insurance companies are paid not to pay you. We pay them so that we don't have to pay for an accident, that's how they make their money. – The insurance industry needs to work in favour of the victim.

This recognition that Case Manager short-comings are often a result of pressures from within their employing agency, is reflected in survey responses about being treated fairly by Case Managers. As shown in Figure 4, many (41%) of injured workers could neither agree nor disagree regarding whether they had been treated unfairly by their Case Manager. This is also reflected in the responses shown in Figure 5, with the majority of injured workers not knowing whether to agree or disagree that their Case Manager was working in their best interests.

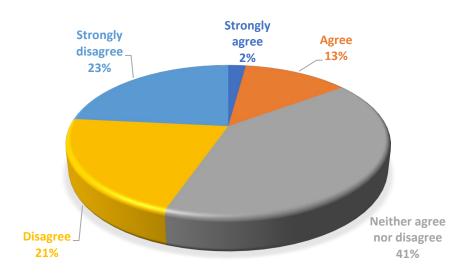


Fig 4. I believe I was treated fairly by my Case Manager (n=47)

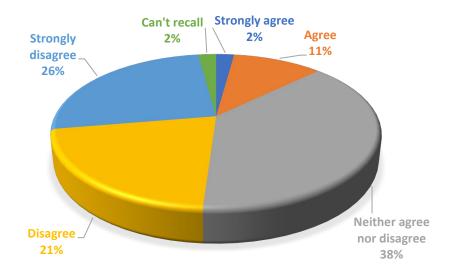


Fig 5. My Case Manager was working in my best interests (n=47)

Similarly, interviewees had the perception that there was pressure on Case Managers to get clients "off the books".

The insurance companies actually get extra money for getting rid of clients, like for cutting people off, and all that kind of crap. And that's how you feel, that they're doing everything in their means to get rid of you... The whole process is so devastating, it's stressful.

It's all money and politics with these mobs. I mean, this had nothing to do with WorkCover, this was [agent], the insurance company, the ones that are forking out the money. This is where it's all wrong, it's run by insurance companies. It shouldn't be, it should be run by WorkCover.

Client-centred approach

Injured workers talked about how important it is that they have a voice in their recovery journey, and that their individual situation is accommodated in Case Manager decisions and communication.

An injured worker who was a teacher referred to how the teaching profession is student-centred as an example of the importance of WorkCover being client-centred, as articulated in the following quote.

Just like we are student-centred, student voice, client voice, in all the things.

Adoption of a client-centred approach

What was evident throughout the interviews with injured workers was a perceived vulnerability associated with the dependent nature of their relationship with their Case Manager and WorkCover. The potential risks and harm associated with this somewhat unequal power relationship can be address through the establishment and demonstration of client centred management practices.

I think central to it is that there is a perceived or otherwise power imbalance. So, as the injured worker, you feel disempowered, you feel dependent upon, you feel you have to do things to tick certain boxes that you've never had to tick before, meet certain things, do things that you've never had to do before, in order just to continue to pay your mortgage or to try to get back to work. You've lost a lot more than just, "Oh, ouch, I've got hurt at work." Work is a lot more than just a way to earn your income for many of us, so it matters a lot...And the disempowerment that comes with not being able to do that of ourselves, not through any choice of our own, we didn't decide to chop our finger off or get bullied for two years, it's not a choice you make, but that feeling of disempowerment, and that essentially your Case Manager has a fair amount of control, that is perceived by the injured worker. They may not have, but because you're injured and they have the information and you don't, because you haven't gone and studied how to be on WorkCover before you went on it. All this new information, you're just flooded with new information. So, your GP has power, your WorkCover agent has power, your Return-to-Work Coordinator has power, your Psychologist to a certain extent does. To some extent, you feel disempowered. So, to be given agency again by your Case Manager through conversation is really empowering, and it will get you back to work quicker, and then you cost them less.

Suggestions for improving Case Manager support

In the survey and phone interviews injured workers were asked for suggestions regarding improving Case Manager support. The following Table 1 shows the themes and interview quote responses.

Table 1. Suggestions for improving Case Manager support

Suggestion	Quote
Case Manager consistency	Well, then put the structures in place to support a quick return-to-work. And one of them that would be really beneficial would be to have ongoing professional relationship with a Caseworker/Manager, call them what you will. But avoid this changeover, this constant changeover.
Active support of injured workers by Case Manager	A little bit more contact with the person and like, make sure they understand everything. I don't know whether it was because of COVID or what, but I'm sort of lost, and in shock. Because I've always worked. I've never been on Centrelink, and now I'm on Centrelink. I'm just struggling, really struggling. (3)
	Not until he's fully recovered, don't stop the payment but be more proactive in his actual rehabilitation. Don't just say, "Send him a letter to do it." you've got to remember they're dealing with someone who's messed up in the head, someone who's not only suffering from an injury, it's an injury that scrambled his brain, it's messed with his head. I don't think that was taken into account. The mental health side of it.
Tailoring support to individual injured workers	It would have come from the many Case Managers that I've had but it was a standard email; it wasn't personalised. If you're familiar enough with email process, it's pretty easy to see when an email has been personalised or whether an "insert name of injured worker" kind of email.
	This big rubber stamp bullst operation that refuses to acknowledge in any way the different and divergent difficulties people face is a farce. It takes already awful situations and makes them far worse.
	It cost me my back but maybe I saved someone's life, none of that matters though, I'm just a line on an excel spread sheet somewhere.
Support with informing injured workers regarding the overall WorkCover process and associated milestones	a bit of a roadmap sort of thing, like not necessarily a timeline, just so that people know the process. Okay, this is what you're doing It was one of the job providers that were helping that said, "Oh you know, your payments only go for x amount of time." I knew it wasn't indefinite, but I wasn't really kept aware of that sort of thing.
Timely responses to clients' queries and communication	Probably follow-up on information, my questions I might've had or queries. I found follow-up wasn't always great but those who did, that was something I appreciated. Be reliable and I suppose a fairly timely response would be great rather than having to wait weeks and me having to chase them. I don't think it's appropriate that that's the role they should be playing. They should be getting back to me with information rather than me having to chase it.
	Contact me more. Or contact me at all. Being more available. Yeah, just being more available, just being there and answer my calls and emails.

Suggestion	Quote
	Four of my six Case Managers they were really, really good. They quick reply when my email is just a request. If it's denied they will tell me straight away, 'We cannot approve this one but this one we can approve.' They will – because I don't mind getting disapproved if they just tell me the reason. The problem with the last Case Manager is I didn't receive any reply.
Balanced obligations - Dual role supporting injured workers and their employing agent	Well, they could have batted for me, that would have been nice. But you have the insurer on one side, who doesn't really want you to have more weeks of compensation
Improve Case Manager training	So, I said, "How do I go about claiming extra payments and that?" And he went through it all with me, but then I was knocked back anyway. So, I went through the whole process, being told, "Don't worry about it, your payments won't stop, they'll continue," and then to find out that it was declined. So, I was always given reassurance not to stress about it, and then when the time come, and the payment stopped, I wasn't told that I was declined on extended payments. I found out a week after the payments stopped.
	I understand that not everyone knows everything about their aspect of their job, and they've got to look things up, but if they don't know the answer, say, "I don't know the answer, I will get back to you," not give you information they think might be right. But I do think that workers need to be trained a lot more before they're given a caseload.
	Not having been given sufficient empathy training with clients. Because they are working with people who are vulnerable. "What's your claim number?" It does not make me feel that I have any agency. It makes me feel as though, "Oh, so you refer to me as a claim number. I see.
	Now, he was flummoxed. He did not understand the question. And tried to have me on the phone, and tried to explain to me. He was reading from a script And we were going round and round in circles, and I ended the call. And I said, "Look, this is not working. You're not understanding what I'm trying to tell you. It's not that difficult." I did ask to speak to another Case Manager, I used the correct terminology then, but that was not an option. And I had previously asked them, because I know a lot of cases are complex. Mine was complex because of the number of people involved from an organisational perspective.
	He [Case Manager] was the one assuring me that my payments would not stop, and that just to get the letter from the doctor. And then they wrote the doctor and asked if I had the capacity for ongoing work, and he said that, "Yes, there is a capacity to go back to full-time work, but we can't predict the future." And that is what blocked me from getting my payments.

UTILISATION OF TRANSITION SUPPORT MATERIALS

In this chapter the evaluation findings associated with the second research objective are reported:

To explore if and how injured workers utilised the Transition Support materials, the helpfulness of the materials and how they believe these materials can be improved.

Injured workers were asked if they could recall being offered information materials from their Case Managers, to help them during their transition to income payments ceasing. Twenty percent of the injured workers recalled being offered materials. They were then presented with questions specifically about the Fact Sheets and Ask Izzy search tool, and the following sections outline the injured worker responses to those questions.

Fact Sheets

As show in Figure 6, the majority of respondents (66%) reported that they had not heard about the Fact Sheets. Of the remaining injured workers who were aware of them, just over one-quarter (28%) said they had read them.

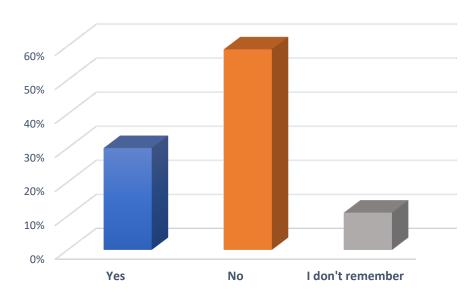


Fig 6. Clients who recall being informed about the Fact Sheets(n=46)

There are seven Fact Sheets available, designed to provide information to support injured workers during their transition period. Table 2 shows the number of injured workers who reported that they had read each of the Fact Sheets, from the 14 who recalled receiving them.

Table 2. Number of injured workers who reported that they had read each specific Fact Sheet

Fact Sheet	Number who read it
Next steps in your claim	3
Accessing your superannuation early	3
Applying for government support	4
Financial hardship and managing money	4
Community services support	3
Looking after your mental health	5
Info for injured workers: Job seeking service	3

Injured worker interviewees offered the following responses in relation to the Fact Sheets.

I did read some of them, like the financial one about where to find assistance and stuff like that and the information on there was important.

They might've been useful for me but I didn't act on them as I said because my mission was to find suitable work so I didn't actually use them. I filed them on my laptop, thinking that if I was in that space, I might need them.

Surveyed injured workers were asked about the delivery of the Fact Sheets and whether their Case Manager had actively utilised them as a support tool during their transition to the income payments ceasing period. Of the 14 injured workers who recalled receiving the Fact Sheets (30%), 12 responded to this question, six (50%) reporting that they received the Fact Sheets by mail, and four (33%) via an online link (Table 3). However, only one injured worker noted that their Fact Sheet delivery included a conversation from their agent. The remaining 11 could not recall their Case Manager discussing these materials with them.

Table 3. Case Manager method of Fact Sheet delivery

Fact Sheet delivery and support	Frequency
My Case Manager spent quite a bit of time going through them with me	0
My Case Manager briefly talked about them with me	1
My Case Manager mailed the Fact Sheets to me but we did not discuss them	6
My Case Manager sent me the online link to the Fact Sheets but we did not discuss them	4
My Case Manager did not talk to me about Fact Sheets at all	1
Total	12

Some injured workers reported that the information provided was generic rather than tailored to suit their individual circumstances. This hindered their uptake of the materials.

All I received was emails, and 'you can look at this article or that article about transition'. So I wasn't very happy about that. Yeah basically Fact Sheets, yeah generic.

why are you sending me all of this now? ... some of it I didn't even know about. I thought, "why wasn't that happening before?" A phone call before ... just to say, "look, you're going to receive this. You're going to be bombarded with it, but we just have to go through – this is just the process," which is fine. I totally get that. But it's just like, "well, what do we do now?".

A couple of the injured workers mentioned that the Fact Sheets had been distributed by another employee from their agency, as a scheduled milestone process.

All the Fact Sheets didn't come from my Case Manager. It came from [agent] but not from my Case Manager... It's all complete all the necessary things that I could do or I could get help for, on paper it's all there... as I told you, from a different officer from [agent].

I did get an email in regards to it, with the link. That was actually from someone in Support at [agent], and she went through and explained it to me.

Ask Izzy search tool

WorkSafe has partnered with Infoxchange who had developed an online search tool that assists users with accessing free service providers within their local area. This online service, called "Ask Izzy" offers access to support in relation to finances, housing, life skills and education, advocacy, counselling, legal aid, and crisis help. Ask Izzy is anonymous and free to use. An image of the Ask Izzy homepage is provided in Appendix B, the weblink is https://askizzy.org.au/.

To gauge online accessibility, injured workers were asked how frequently they generally engaged with apps via mobile phone, tablet or computer. Even though 60% reported using apps a few times per week or every day, only two (4%) injured workers reported ever having used the Ask Izzy search tool. Of those who didn't use it, almost all (89%) reported that they "don't know what it is" (Figure 7).

No, I've never heard about it, until I got your ... questionnaire thing. I'd never heard of it.

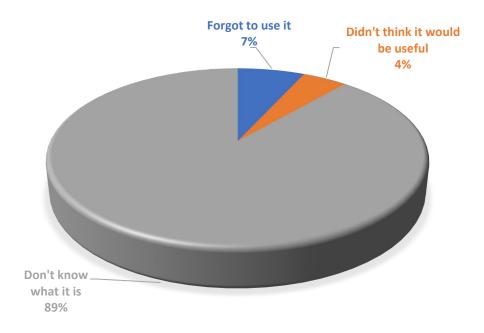


Fig 7. Reason provided for not using the Ask Izzy search tool(n=44)

For the two injured workers who used Ask Izzy, it was used for urgent support. One used it for accessing a second hand bed from the Salvation Army and both injured workers used it for accessing food parcels.

Utility of the Transition Support resources

It was difficult to evaluate the utility of the Transition Support resources as most of the injured workers could not recall receiving them. In the survey and interview feedback, a few participants identified injury related barriers to utilising these information resources, such as reading and comprehension limitations and feeling overwhelmed by the amount of information they received.

Well, I got an email that says that I could do all this, blah, blah, blah, blah. But in the end, it just turned into a bloody gobbledygook, because you try and read it, and it's just like I don't understand a word of this... it is just hard. Not something that you want when you're on WorkCover I can tell you.

Another client talked about how her injury made it challenging for her to focus on paperwork and how this disability caused distress during the second review process when trying to navigate all the paperwork requirements. She talked about not being capable of applying for Centrelink, how this resulted in her being faced with no income source and how she needed personalised hands on support to navigate this process.

I actually really needed a hand just doing that Centrelink paperwork... They gave me a Transition Support person who emailed me a couple of times and I really didn't understand what kind of support she could give me. Are you going to come to my house and help me with the paperwork to get on the Centrelink site or are you going to help me financially? Or what is this going to help me with? Nothing. Didn't help me with anything.

For some workers, underlying resentment toward the WorkCover process appeared to be a barrier to the uptake of the materials. This resentment was due to the distress associated with income payments ceasing, and generalised fatigue from navigating the second entitlement process and a non-supportive Case Manager relationship. Comments were directed at materials being generic and somewhat tokenistic and also questioning the authenticity of the "providing support" motives behind the resources, with many believing the only underlying aim was to get them off WorkCover.

They were just an attachment in an email ... At the stage that they came, I actually didn't read them because what you get is a lot of generic things called "Fact Sheets" or this or that. And because none of them are particularly individual, after a while you go, "Whatever," ... I didn't even look at them.

A lack of tailoring to suit individual clients was also noted, creating a sense of not being viewed as an individual. This sentiment was further exacerbated when the materials were received in a "mass" mailout, with this impersonal distribution manner playing an additional role in the resources being ignored and associated with resentment.

No, it's just it's all computer-generated, there was nothing personal in it at all.

They were probably not relevant to me...because I was already on a Return-to-Work Plan, so they didn't apply to me. And again, it just reinforced that sense of, "Well, they just hand this out to everyone. They're just ticking their box. They're not choosing which ones." I mean, okay, maybe they get told to send every Fact Sheet to every injured worker, but I didn't need the Centrelink thing, I didn't need the Assessing your Super early thing because if they knew about me, they would have seen that I was already back at work three days a week. So, if you're going to send me stuff I don't need, the messaging from that is, "You don't really know about my claim."

Injured worker suggestions regarding improving Transition Support material utility

When asked to provide feedback regarding how the Transition Support materials could be improved, injured workers talked about the importance of personalising the process through tailoring information to suit individual needs and providing support to understand the materials provided (Table 4).

Table 4. Injured worker suggestions to improve utility of Transition Support materials

Suggestion	Quote
Case Managers introducing the materials in a session designed for this purpose, supporting an interactive discussion about the materials and the relevance of the information to the injured worker's recovery journey	Ring me up, have a real conversation with me and tell me what's available, and ask me what would I like. Don't make the decision about what you think is relevant based on what you know Involve me in it by knowing and asking and giving me agency.
Tailoring support for injured workers facing additional challenges such as language barriers, cognitive impairment, or mental health issues	Because I've got mental health issues, because of everything that happened to me, now I really struggle doing anything to tell you the truth. Anything like with deadlines, or I've got to have something in – the paperwork in at a certain time, and I wouldn't be the only person on WorkCover with mental health issues now.
	Because I was injured, it was difficult for me to process information and retain information and believe information, such was the nature of my injury.
Clients who did read the Fact Sheets still noted the importance of having additional hands on support during the transition period.	It's such a sh.t situation to go through; when you know your payments are coming to an end, it's really a horrible situation. The stress and anxiety that comes along with it is really hard. So those Fact Sheets are good, but it'd be good to have, your Case Manager go over them with youand actually sit back and explain it. Because when you're going through that, reading those pamphlets, you're in one mind going 'Oh my God, oh my God, oh my God,' where if you actually sort of sat down with someone and they explained it and they talked to you about it, it'd probably be a little more helpful.

UNDERSTANDING OF SECOND ENTITLEMENT PROCESS AND PREPARATION FOR INCOME PAYMENTS CEASING

In this chapter the evaluation findings associated with the third research objective are reported:

To determine if, as a result of participating in Transition Support, injured workers felt they understood the second entitlement review process and were able to prepare for their weekly income payments ceasing

Understanding the second entitlement process

Injured workers were asked in the survey whether the information provided by their Case Manager had helped them regarding their second entitlement review period. Nearly half (47%) of injured workers did not agree that the information provided by their Case Manager had helped them understand the second entitlement review process, and only one-fifth (21%) thought that it had helped, see Figure 8.

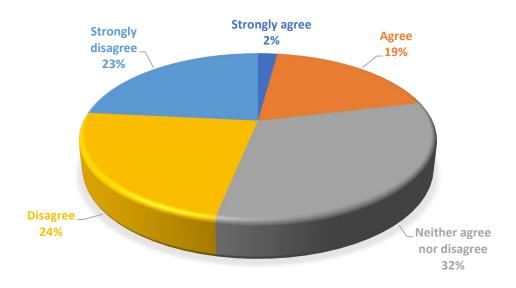


Fig 8. Information from Case Manager helped regarding second entitlement review(n=47)

Injured workers were also asked if the support they received from their Case Manager helped them to understand the second entitlement review process. As shown in Figure 9, just over half of injured workers (56%) disagreed, reporting the Case Manager did not provide support to help them understand the process, and just under one-quarter (23%) agreed that it did.

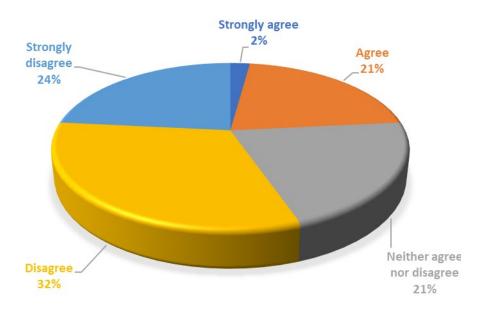


Fig 9. Support from Case Manager helped regarding second entitlement review(n=47)

During the interviews, when asked if they understood the second entitlement process most of the injured workers responded with a direct "no" response.

Not at all. And I still don't.

In addition, they were asked if any of the information, correspondence or any other communication from their Case Manager had helped them understand the second entitlement process. Again, most gave a direct "no" response. This quoted injured worker attributed the lack of support across the second entitlement review to an agenda focus of ending his income payments.

No. I got no support. None at all. I mean, I've found that all they wanted to do was get rid of me. They just couldn't wait to end my payments, and that was that.

Distrust in the process

A degree of distrust with the second entitlement review process was evident amongst many injured workers.

I became distressed, confused and depressed more, knowing I had no way of obtaining work due to my injury and believe this was purely a decision made from my Agent consultant's personal opinion.

After being on WorkCover for about 6-12 months, you realise that either you can rely on yourself or your solicitor; you can't rely on WorkSafe or the insurance companies.

Overwhelmed navigating second entitlement process

Some injured workers commented on feeling overwhelmed by the requirements across the second entitlement review period.

I just thought I was a subject of the process... You'd kind of be like a ball in a pinball machine. You didn't really know where you were going until you hit the flipper that pushed you in the direction that you were intended to go in.

Preparation for weekly income payments ceasing

Injured worker preparedness

To gauge the effectiveness of the Transition Support process, injured workers were asked how prepared they were for their income payments coming to an end. As shown in Figure 10, just over half (58%) did not feel prepared, and less than one-fifth (17%) felt prepared.

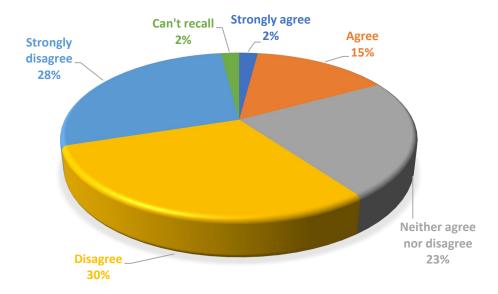


Fig 10. I was prepared for my income payments coming to an end(n=47)

Information provided by Case Manager

Injured workers were asked whether the information provided by their Case Manager had helped them prepare for the income payments ceasing. As shown in Figure 11, just over half (55%) did not think that the Transition Support information provided by their Case Manager had helped them prepare, and almost one-fifth (19%) thought that it had helped.

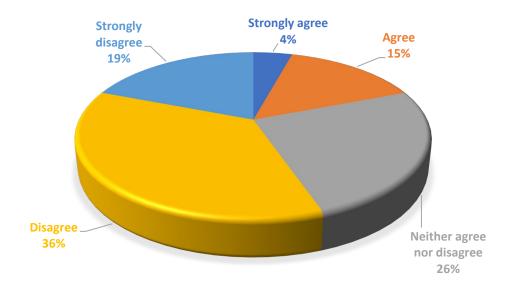


Fig 11. Information from Case Manager helped regarding income payments ending(n=47)

Injured workers were also asked if the support they received from their Case Manager(s) helped them with preparing for their income payments ceasing. As shown in Figure 12, just over half of injured workers (53%) did not agree that their Case Manager helped them during the transition period, while one-fifth 19% agreed.

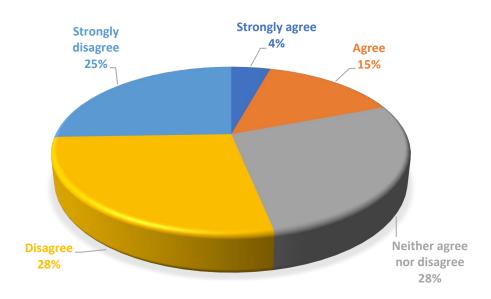


Fig 12. Support from Case Manager helped regarding income payments ending(n=47)

Being unprepared for their income payments ending is captured in this following injured worker quote.

All of sudden I got this email that had the letter, coming up to 130 weeks. And there was all these attachments. They had Centrelink, mental health, and I didn't really understand what was going on, to be blatantly honest.

Another injured worker, who had found the Transition Support information helpful, talked about how he had then proactively sought and read additional information relevant to his injury and recovery. This suggests that providing written information materials is likely to be considered informative to those who regularly read and appreciate this mode of communication. However, injured workers with cognitive functioning, mental health and pain related limitations talked about being overwhelmed with the required paperwork and forms, and these injured workers needed more personalised support in the delivery of the Transition Support materials.

It needs to be more basic. There is so much information that it becomes confusing, especially for someone who is in pain and on a lot of pain medications. I also believe all Case Managers should be fully trained, so they can follow up and answer any questions.

The mode in which Transition Support materials are communicated may require tailoring to individual injured workers or groups. Many interviewees had worked in trades and discussed not reading very much. They may possibly engage with materials delivered in an interactive, online mode.

The importance of providing clear and detailed written information to prepare workers for their payment ceasing was highlighted.

It needs to be direct and clear. Then it needs to have pages of additional information, like how to approach Centrelink etc...It needs to quide you out of support from the system.

One injured worker explained how receiving the Transition Support materials six months prior to their income payments ending had been helpful in preparing for their income payments ending.

They emailed me everything I think more than six months before it would end.

This interview extract captures how being poorly informed by a Case Manager led to an injured worker mistakenly believing their income payments would continue.

I think there needs to be more contact from WorkSafe. I think as the insurance companies, I don't think they should be able to give false information and assure people that their payments aren't going to stop. I think that was my biggest downfall, is I trusted my insurance company, and I trusted my caseworker, and at the end of the day, he actually screwed me over. That needs to be made clearer to people, that if there is a chance, then people need to know that, if you had a chance of actually going back to work full-time, then yes, your payments will stop. As much as I don't agree with the WorkCover policy of that happening, I think it's wrong, but that is the actual policy, so. And I think that needs to be outlined better for people.

Provision of mental health services and support across second entitlement review

The importance for Case Managers to actively identify mental health deterioration in their clients and refer them to psychologists was also highlighted as an important factor in supporting a positive transition through the second entitlement process and across the overall WorkCover process.

Where you've had clients suffering these difficulties ... that have suffered more than others, have had that negative experience, has that support been there as a psychologist? And are they mortgage holders? You know, mortgage or renters. So, there's the financial pressures. But to have the support of the psychologist through the process, this is where I had every opportunity to go forward.

When I received the letter to say that my payments were ceasing, I obviously rang them and spoke to them and said, "Well, you know what's my next step? Obviously, I don't have the capacity to return to work full-time at the moment." Like I'm quite lucky to actually be able to work from home with a new employer, but I don't know how long that's going to last for. And I said to them, "You know, I'm working 24 hours [per week], that's all my doctors are giving me permission to work at the moment with psychologist appointments and stuff like that." And he said, "Yep, so you'll need to apply for the extended payments." And he sent me all the forms, and I did obviously medical reports, and everything like that, and sent it all back into them. So, they had it probably five weeks prior to my payments actually ending, but I didn't receive an answer to say they'd been declined until a week after that.

While some of the interviewees who discussed mental health had a mental health injury claim, others noted a deterioration in their mental health across their time on WorkCover. This mental health deterioration was commonly associated with stressors such as pain, being unable to work, financial concerns, and a lack of personal control over their employment and income. While WSV has made concerted efforts to address mental health support, injured workers talked about being refused or receiving limited funding for psychological support in their WorkCover claim.

Well, you can't do it in three (referring to only being funded for 3 psychologist sessions). I mean three – the first one, you're basically just getting to know your psychologist, or the doctor, or whatever. You're not going to trust them straight up, you've got to build that trust, and trust doesn't come in three sessions I can tell you now.

The mental health side of things isn't taken into consideration enough because I'm already under mental health because I'm highly stressed, not working, I'm injured and my brain and I've got a lot of scrambled eggs and mashed potatoes where the brains are supposed to be. I couldn't understand why it had to nearly destroy us ... the patients aren't advocated enough for.

Injured worker suggestions for improving transition support

A small proportion of injured workers also provided feedback about the second entitlement review, Transition Support services, or anything else they felt might help to improve injured worker support and outcomes. While this feedback was only from a few participants, based on its relevance, it was deemed as warranting reporting. A selection this feedback is captured below (Table 5).

Table 5. Injured worker suggestions for improving transition support

Suggestion	Quote
Being notified earlier	Make it a bit earlier in the process.
Regular updates regarding timelines and pending milestones	It shouldn't be a one-off singular letter. You should get one every six months updating you on what's going on and what's coming your way.
Information and support tailored to suit injured workers with language or cognitive limitations	They should also make sure they understand any underlying neuro-divergent issues that people might have. You approach someone with ASD differently, same goes for ADHD.
Information about ongoing payment entitlements (e.g. medical treatment costs, impairment benefits).	Put the specifics (timeframe etc.) of the medical and rehab coverage that I can still ask assistance with, after the ceasing of income payments. Specifics about the medical and rehab coverage after ceasing of income payments. I think it was lacking in details regarding rehab and medical expenses It should be written in the [second entitlement FAQ] Fact Sheet that, 'Okay, you're still allowed another 52 [weeks] — it should be detailed so that at least you could quote them or tell them it's in black and white that you're still eligible for the rehab and the medical expenses after the ceasing of the payment. So to answer your question I think that's one of my recommendations to put it really detailed on the letters that they will tell us before the cessation of the payment. After receiving the letter I then had to undergo further surgery, which after being approved the cessation of payments would be re-evaluated. Heard nothing until just after surgery a reminder from my Case Manager, which I then had to act on. It would have been good to hear that the payments were stopping regardless of surgery.

Suggestion	Quote
More details about second entitlement review adverse decision	It fails to provide legitimate reasoning for stopping payments, should also provide what payment week you are at not a general comment of "whether or not" employee has reached 130 weeks. More on our rights. I've been devastated by it all.
Funding for re-training	Provide more training for employment basically had to beg, borrow, steal and basically grovel, to get a six-week training course approved which I ended up paying for myself, because they wouldn't approve it. And it's like, well how am I supposed to get a job if you're not going to train me up, or not going to provide the extra training? I mean, I've been doing the same job for 23 years. I know nothing apart from my job which I can't physically do anymore, and they're refusing to train me up on something else. It's like well, hang on a minute, what do I do?
Case Manager consistency	The biggest thing that they could change - and it could be a thing - is to keep the same case worker all the way through the 130 weeks.
Conflict of interest - Insurance agents administering WorkCover	To be honest with you, I think WSV need to take back control of the organisation. I mean, WSV were good, but it's the insurance companies behind it that are paying for it, they're the ones that are doing the damage because, they don't want to fork out money, because that's what they do, they try and take your money and not fork it out. But they're not for the people, whereas WSV were. WSV try and get you back into a job, whereas these mobs don't. (4) They keep pushing saying, "Oh yeah, we need you to return to work." But it's only to lower their premiums, it's got nothing to do with rehabilitation. It's like I mean, I had my third operation, I was back at work two days later, because they didn't want to pay the extra premiums. It's like get over it. And to me, it's degrading and disgusting, the way they treat people. (4)
The importance of reviewing the process for injured workers who cross into retirement age while on WorkCover	I just think they need to change the rules about older people, because I started teaching late, and I'd intended to teach until I was 70. I'm almost 70 now, and I'm still working, but I'd planned to do that and retire at 70. But what I felt was I didn't have any recourse to go through a legal process to get compensation from the Education Department - further compensation - because of course, the amount of money they pay you is just a proportion towards the end of your compensation period. So I feel like I've lost probably about five years of income. Don't forget, most people that may retire and then go back as VRTs or relief teachers, and they're still allowed to teach, and they still have agency. So it's not that you have to retire at 65 because you can get on the pension or whatever. I'm not a person that would retire. And I started late, I started in my 50s, so - Yeah, they're saying over a certain age, then I can get the pension so I don't need worker's compensation.

SUMMARY AND CONSIDERATIONS

This evaluation demonstrated that Transition Support is not reaching injured workers as initially intended by WorkSafe, and injured workers continue to be unprepared when their income payments cease. Further, the Case Manager and injured worker relationship is fraught for a majority of workers who participated in this evaluation, resulting in injured workers' disengagement. There are opportunities to strengthen the Transition Support program to ensure it is working as intended.

Utility of Transition Support materials

There was a low uptake and utilization of the Transition Support materials. They are rarely discussed by Case Managers, and also rarely used by injured workers. Low uptake was partly due to the impersonal delivery of the materials, and the materials being generic rather than tailored to the individual injured worker. In addition, a buildup of injured worker distrust and/or resentment toward WorkCover, the agent or Case Managers hindered injured workers' openness to the Transition Support materials and their uptake.

Consideration: To promote the utility of the materials, encourage agents and Case Managers to establish a supportive person-centred approach to foster rapport and trust. Train the Case Managers in best approaches for sharing the materials. This could include:

- tailoring the materials to the individual workers' needs rather than sending them in bulk
- calling the worker to discuss the materials before they are sent (if possible)
- being sensitive to language and literacy limitations.

Second entitlement review and preparedness of injured workers for payment ceasing

Situation: Overall, injured workers made minimal use of the Transition support materials, leaving many confused during the second entitlement period. While some injured workers were prepared for their income payments to end, the majority were not. Workers attributed their lack of readiness to insufficient Case Manager support.

Consideration: Improving the Case Manager and injured worker relationship is crucial. This is affected by many external factors and the structure of the workers' compensation system, and a systems thinking approach may help address these factors. Earlier notification and regular updates regarding timelines and pending milestones as well as information about ongoing payment entitlements were also requested by injured workers.

Support from Case Manager

Injured workers' experiences varied amongst agents and individual Case Managers. A high Case Manager turnover resulted in ill feelings and exacerbated injured workers' sense of the WorkCover process being impersonal and generic. Supportive Case Managers were appreciated because they provided valuable information and guidance. Conversely, unavailable or unsupportive Case Managers resulted in injured workers' feeling resentment and distress. In addition, receiving notification that their income payments were ceasing was a distressing process for most injured workers, and this distress was exacerbated when they received limited or no contact from Case Managers. A lack of support was perceived to affect some injured workers' mental health and recovery.

Consideration: Injured workers who have entered the second entitlement review process are vulnerable and require extra support. Case Managers need to take a person-centered approach with active listening, proactive support, and timely follow up of injured workers' queries. Staying abreast of the case history and tailoring Transition Support materials to each workers' unique needs would negate the negative experiences discussed by injured workers.

APPENDIX A. CURRENT FINANCIAL SITUATION

The following section explores the financial experiences of injured workers across their transition period (last 12 months) and currently, now that their regular income payments have ceased.

The majority (73%) of injured workers had sought legal advice regarding their WorkCover claim and entitlements and 14% had received a Common Law payment.

Injured workers were then asked about their level of satisfaction with their current financial situation. As shown in Figure 13, the majority (72%) reported being unsatisfied with their current financial situation (Unsatisfied and Very unsatisfied) compared to those who identified as being satisfied (13%).

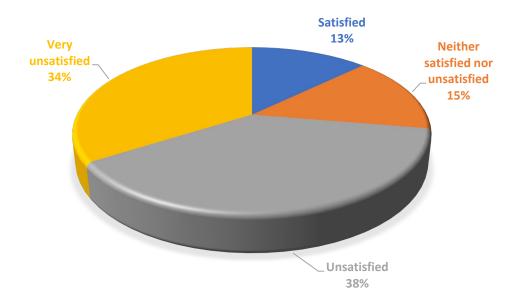


Fig 13. How satisfied are you with your current financial situation?(n=47)

To explore the degree of financial difficulty participants were currently experiencing, a number of questions inquired about personal finances. To respect participant privacy these questions were posed as optional.

It appears that the majority of respondents do not have access to savings or credit to pay an urgent bill, with 51% reporting not being able to access \$2000, compared to 23% who could access this amount of money (Figure 14).

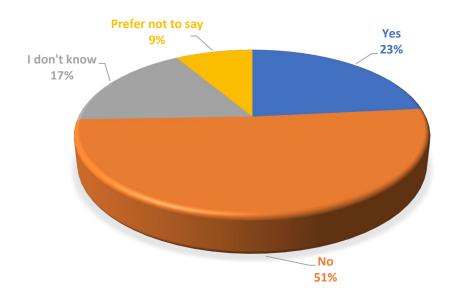


Fig 14. Ability to access \$2000 for something urgent (n=47)

To gauge the effect of financial stressors on their living standards, injured workers were asked if they had been faced with any of a prescribed list of financially related limitations over the past 12 months. Responses are presented in Table 6.

Table 6. Financial limitations faced by injured workers within the past 12 months

Financial limitations	Percent (%)
Could not pay the amenity bill (electricity, gas, phone) on time	31
Could not pay the mortgage or rent on time	29
Could not pay car registration or insurance on time	27
Could not make minimum credit card payment	16
Pawned or sold something for needing cash	22
Went without meals	27
Were unable to heat or cool your home	20
Sought financial assistance from family or friends	37
Sought assistance from welfare or community organisation	16

It is also important to note that the percentage of injured workers who reported facing financial stress could be under representative, as it was not possible to identify if missing data was attributable to participants deciding to opt out of responding to these personal questions or that these limitations were not applicable. However, in addition to the prescribed list of financial limitations a free text "Other" response option was also provided, to which only four participants reported that they had not faced any of these financial limitations and one reported "None of these happened but I pay a lot of bills by payments to minimise defaulting".

This text response quote provides an example of the compounding issues this injured worker is facing, not only with financial challenges but also being on WorkCover.

Having gone through trauma, being on WorkCover and losing a whole part of your identity, and any sense of pride, asking for help is just the last kick in the face - I needed to hold onto the last bit of dignity I had. I have not even told extended family I have been on WorkCover. The stigma is real.

Survey text responses to this question about financial limitations also included the following:

- Anxiety and stress over having to rely on my partner for money. Feeling useless not being able to contribute to bills and food and other expenses like mortgage
- · Could not afford to pay rent and began living in a motorhome
- Had to refinance to be able to survive
- I am digging into my savings
- I've never been on Centrelink, and now I'm on Centrelink. I'm just struggling, really struggling.
- I was penalized by Centrelink for having a compensation payment, which didn't even cover my overall reduction in wages
- Sold items around our home to feed our family and pay bills
- I'm just really struggling with money now.

APPENDIX B. ASK IZZY SEARCH TOOL HOMEPAGE

