



Australian Government

Comcare

SNAPSHOT ISSUE 4

PERCEPTIONS AND PERSONAL CHARACTERISTICS: HOW THEY IMPACT RECOVERY



Summary

- Research shows that the perceptions of people injured at work, their relationship with their employer, as well as their own personal characteristics can influence the length of time they are away from work and the cost of their claims.
- This report examines the attitudes, perceptions and experiences of people within the Comcare scheme who had an active workers' compensation claim between 2011-12 and 2013-14.
- Results indicate that the licensee sector is out performing the premium paying sector on key metrics around return to work and recovery.
- There is also some indication that resilience and perceptions of personal responsibility are influencing the duration of time off work and cost of the claims.

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Background

The Comcare scheme provides federal workers and their employers with an integrated safety, rehabilitation and compensation scheme, no matter what Australian state or territory an employer operates in, or where its employees are located. Comcare partners with workers, their employers and unions to keep workers healthy and safe, and reduce the incidence and cost of workplace injury and disease.

The purpose of this report is to provide insight into workers within the Comcare Scheme who have a workers' compensation claim, including their attitudes, perceptions and experiences around:

- Returning to work
- Perceived responsibility for injury/illness
- Role of their employer
- Relationship with their employer
- The Comcare scheme
- Service from Comcare

The report also provides insights into the relationship between the key elements of resilience, perceived responsibility for injury/illness, and perceived employer contribution with length and cost of claim. These results are intended to provide some insights into how employers might be able to approach their interactions with injured/unwell workers.

The data presented in this report have been collected as part of the **Comcare Injured Workers Survey**.

More than **5,000 injured workers from across the Comcare Scheme** have been interviewed since 2011.

Survey Participants

This report contains results from workers who participated in the Comcare Injured Worker Survey between 2011-12 and 2013-14.

A summary of the age, gender and injury type of workers who participated in the Survey are shown in Tables 1, 2 and 3 below.

Table 1: Age Group by Sector.

	Premium Paying	Licensee	Overall Scheme
Age Group			
18 to 44	31%	29%	30%
45 to 54	35%	36%	35%
55+	34%	35%	34%

As can be seen in Table 1, the proportion of workers in each of the age groups has remained relatively consistent over the three years.

Table 2: Gender by Sector.

	Premium Paying	Licensee	Overall Scheme
Gender			
Male	38%	73%	53%
Female	62%	27%	47%

As can be seen in Table 2, the majority of workers surveyed in the Premium Paying Sector (62%) were female, while the majority in the Licensee Sector (73%) were male.

Table 3: Injury Group by Sector.

	Premium Paying	Licensee	Overall Scheme
Injury Group			
Musculoskeletal	31%	24%	28%
Other injury	44%	68%	54%
Mental disease	17%	3%	11%
Other disease	7%	6%	6%

Table 3 shows the proportion of workers in each injury group within the Comcare Scheme. The most common injury group represented in each year was the "Other Injuries". The proportion of survey participants with Mental Disease claims was significantly higher in the Premium Paying Sector (17%), compared to the Licensee Sector (3%).

Time off work

People who are injured at work or become ill due to work sometimes need time off to recover from their injury or illness. Figure 1 shows the proportion of workers who took time off work.

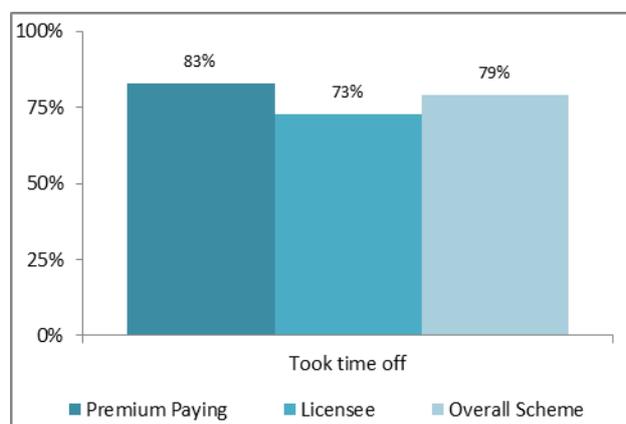


Figure 1: Took time off work by Sector.

As can be seen in Figure 1, around 79% of those workers interviewed had taken time off work following their workplace injury or illness. Workers from the Premium Paying Sector were more likely to have taken time off (83%) than those from the Licensee Sector (73%).

The average incapacity duration for workers within the Comcare Scheme was 23 weeks:

- 26 weeks (Premium Paying)
- 19 weeks (Licensee)

Attempting to return

An important outcome for worker's following a workplace injury/illness is returning to work. As an indication of how employers within the Comcare Scheme are performing in this area, Figure 2 presents the proportion of workers who were working at the time of interview, and the proportion who had attempted to return, over the last three years.

As can be seen in Figure 2, the proportion of workers who were working at the time of interview was lower for the Premium Paying Sector (74%) than the Licensee Sector (82%). The proportion of workers with an

unsuccessful return to work was also higher for the Premium Paying Sector (16%) than the Licensee Sector (11%).

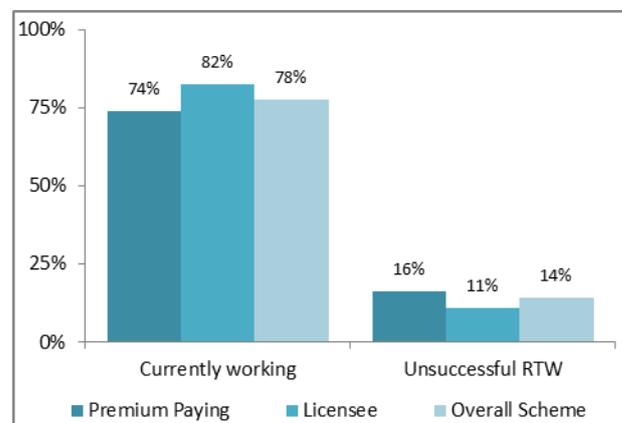


Figure 2: Work status by Sector.

Back at work

Workers from within the Comcare Scheme who were working at the time of interview, or who had previously attempted to return to work, were most likely to have returned to work, or attempted to return to work with the same employer as before their injury/illness (96%).

When returning to work, some workers may need their hours of work or duties to be changed in order to assist with their recovery and return to the workplace. Figure 3 shows the proportion of workers returning to similar, less or more hours, while Figure 4 shows the proportion of workers returning to the same, slightly different or completely different duties.

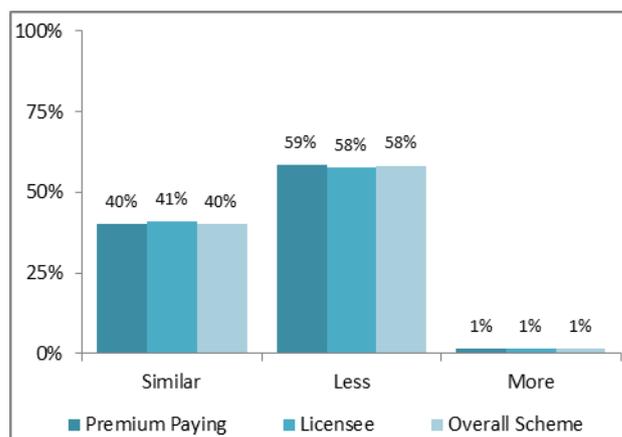


Figure 3: Change in working hours by Sector.

As can be seen in Figure 3, 58% of workers within the Comcare scheme who were interviewed returned to reduced hours, while only 40% returned to similar hours. While these figures are similar for the premium paying and licensee sectors, Figure 4 shows that there was a significantly higher proportion of workers from the Premium Paying Sector who returned to their same duties (44%) compared to the Licensee Sector (27%).

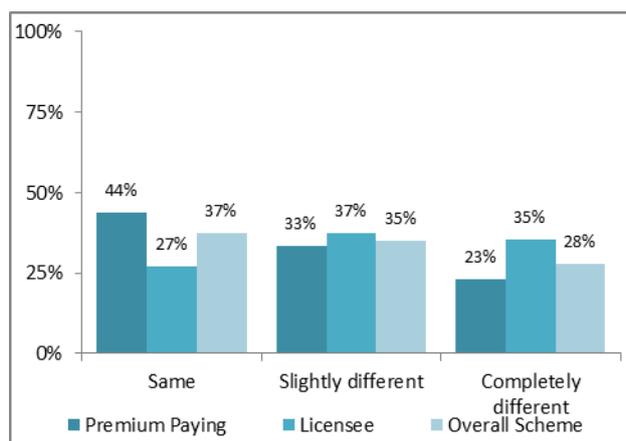


Figure 4: Change in duties by Sector.

The availability of different hours and duties suggests that workers within the Comcare Scheme are being supported, at least to some degree, in their recovery and return to work.

Readiness to return to work

Recent research suggests that workers who return to work before they are fully recovered may find that work assists them with their recovery. It is important, however, that workers feel both physically and emotionally ready to return in order to maximise the benefits of work in their recovery. Figure 5 shows the perceptions of workers as to whether or not they felt physically ready to return when they first went back to work, while Figure 6 shows the perceptions of workers as to their emotional readiness to return.

As can be seen in Figure 5, most workers thought they were physically ready to return

when they first went back to work, although 27% of workers within the Comcare Scheme said that they did not feel physically ready to return.

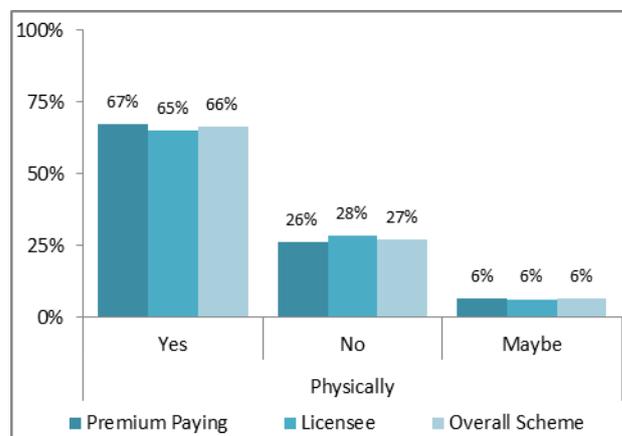


Figure 5: Physical readiness to RTW by Sector.

Consistent with Figure 5, Figure 6 shows that most workers felt emotionally ready to return when they first went back. Once again though, 25% of workers within the Comcare Scheme did not feel emotionally ready to return.

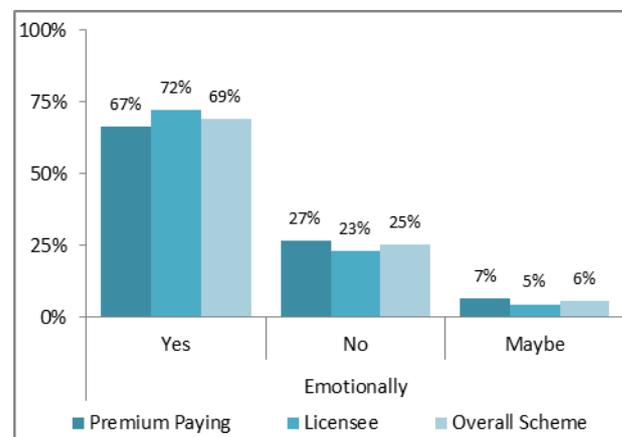


Figure 6: Emotional readiness to RTW by Sector.

Impact of return to work

Figure 7 shows the perceived impact of returning to work for injured/unwell workers. While the health benefits of work have been well established, understanding the perceptions of workers about the impact of returning to work on their recovery is important to determining how best to manage and positively influence the role of work in recovery.

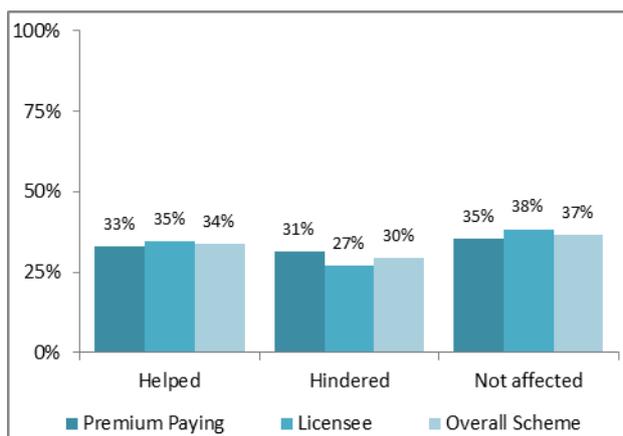


Figure 7: Impact of RTW by Sector.

As can be seen in Figure 7, within the Comcare Scheme, the perception of workers in relation to the impact of returning to work on their recovery was relatively consistent, with a slightly higher proportion (37%) indicating that it had no affect on their recovery, compared to 34% who believed that it helped recovery and 30% who felt it had hindered their recovery. This suggests that there are opportunities for employers to increase the awareness of the health benefits of work among all their staff, not just those on workers' compensation.

Perceived Responsibility for injury or illness

The Comcare scheme operates under no-fault legislation, so employer negligence does not have to be proven for an employee to obtain workers' compensation. It has been suggested, however, that a worker's perception of responsibility, or fault, in relation to the cause of their injury/illness may impact their recovery and return to work.

As can be seen in Figure 8, around two-thirds (65%) of workers within the Comcare scheme perceived that they were not at all responsible for their injury/illness, while just over a third (35%) felt that they were partially or totally responsible.

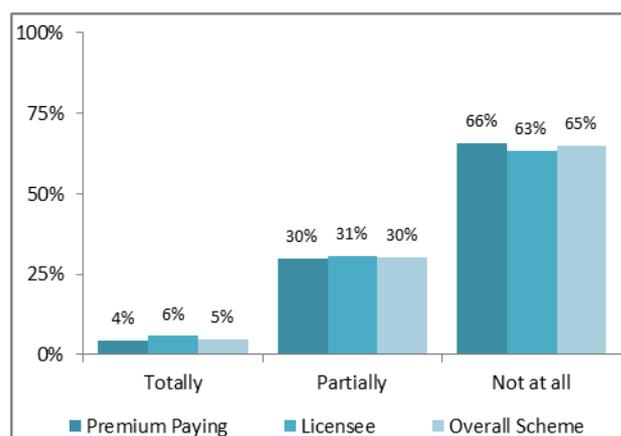


Figure 8: Personal responsibility by Sector.

Similarly, workers' perception about whether or not their employer has contributed to their injury/illness has also been found to impact on their recovery and return to work.

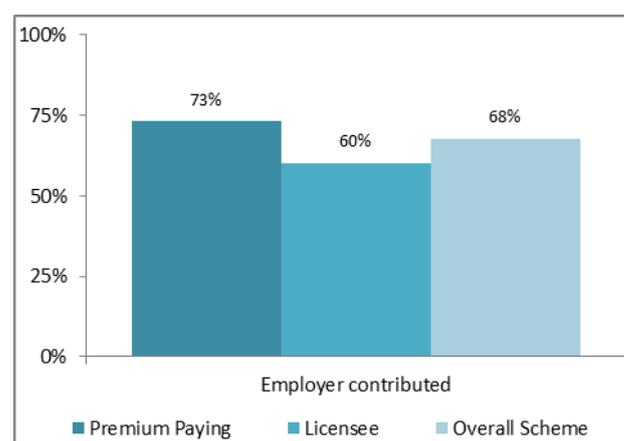


Figure 9: Perceived employer contribution by Sector.

As can be seen in Figure 9, workers from the Premium Paying Sector were more likely to perceive that their employer had contributed to their injury/illness in some way (73%) than those from the Licensee Sector (60%).

Role of their Employer

The role the employer plays in an individual's workers compensation claim can have an effect on how the injured worker progresses. Conflict, or even perceived conflict, during the claim submission stage can have a negative

impact on the worker, their recovery and return to work.

Figure 10 shows the proportion of workers who believed they discussed their injury/illness with their employer before they submitted a claim, as well as, the percentage who believed their employer had helped them manage their injury or illness before they submitted their claim.

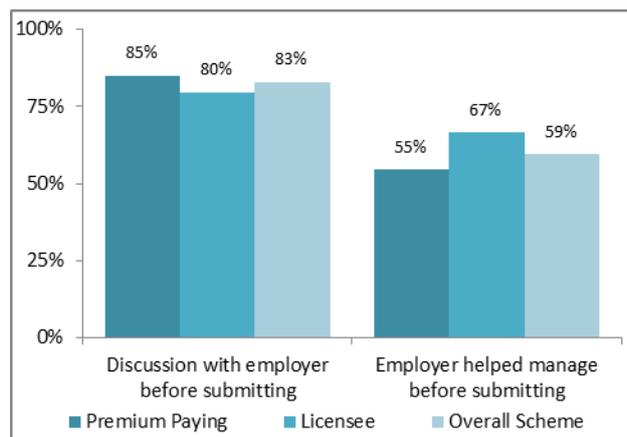


Figure 10: Employer support prior to claim submission.

As can be seen in Figure 10, the majority of workers within the Comcare Scheme reported discussing things with their employer before they submitted their claim (83%), while just over half reported that their employer had helped them to manage their injury/illness prior to submitting a claim. Workers from the Licensee Sector were more likely to feel that their employer had helped them manage their injury/illness, despite more workers from the Premium Paying reporting that they had discussed things with their employer.

Workers were also asked whether they ever thought that by submitting a claim they would be fired or treated differently. Further, they were asked if they ever felt that their supervisor thought they were exaggerating their injury/illness.

As can be seen in Figure 11, only a minority of workers within the Comcare scheme (14%) were concerned that they might be fired if they submitted a claim. They were more likely to have concerns about their supervisor thinking they were faking or exaggerating their injury (24%), or that they would be treated differently by others at work (40%).

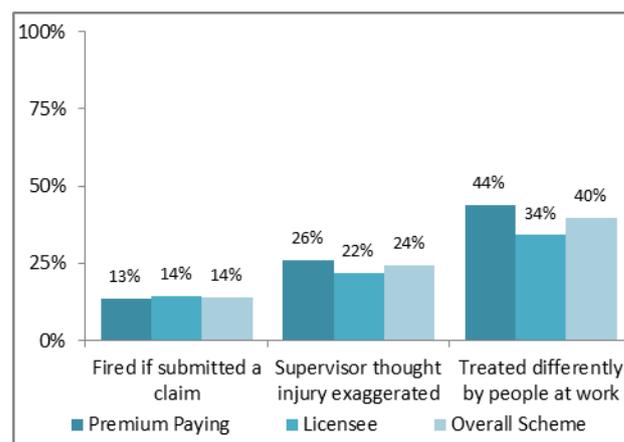


Figure 11: Concerns about submitting a claim.

Support

A supportive work environment can have a positive impact for an injured/unwell worker following a workplace injury/illness. Support can come from their employer, colleagues or even relate to planning around an individual's return to the workplace. Figure 12 shows the proportion of workers within the Comcare scheme who perceived that their supervisor had supported them in different areas.

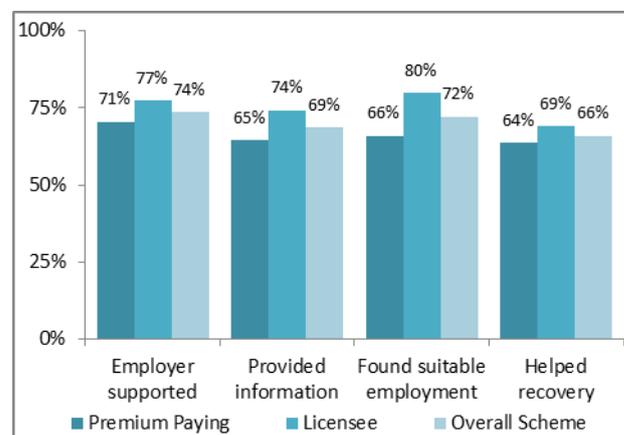


Figure 12: Employer support.

Just under three-quarters of workers within the Comcare Scheme (74%) indicated that they felt their employer had been generally supportive of them, or found suitable employment opportunities (72%). Less than 70%, however, felt that they had been provided with appropriate information (69%), or that their employer helped their recovery (66%). In general, workers from the Licensee Sector were more likely to perceive that they had been supported by their employer than those from the Premium Paying Sector.

Workers from the Licensee Sector were also more likely to perceive that their colleagues supported them (90%) than those from the premium sector (82%).

Figure 13 shows the average incapacity duration for those injured workers whose supervisor contacted them about their recovery versus those who were not contacted.

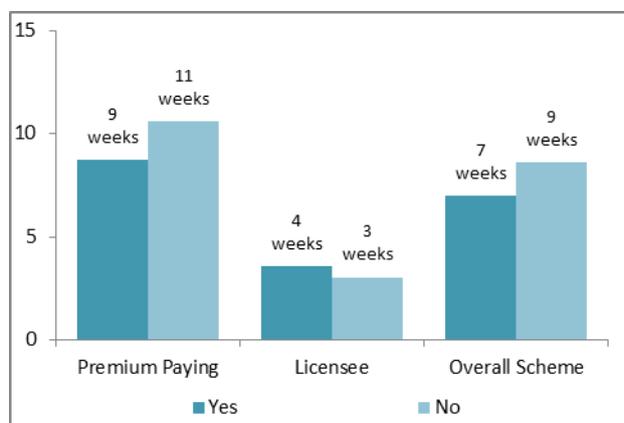


Figure 13: Incapacity by contact with supervisor.

As can be seen in Figure 13, those in the premium paying sector who were contacted by their supervisor about their recovery, on average, tended to have less time off work (9 weeks) than those who were not contacted (11 weeks). This, however, was not the case for workers from the licensee sector.

When workers within the Comcare Scheme were asked about planning to return to work, 62% reported that they had a plan to return to

work, with the majority of these plans being written (80%). Figure 14 shows the proportion of workers who felt that their plan was very helpful, helpful, not particularly helpful or not at all helpful.

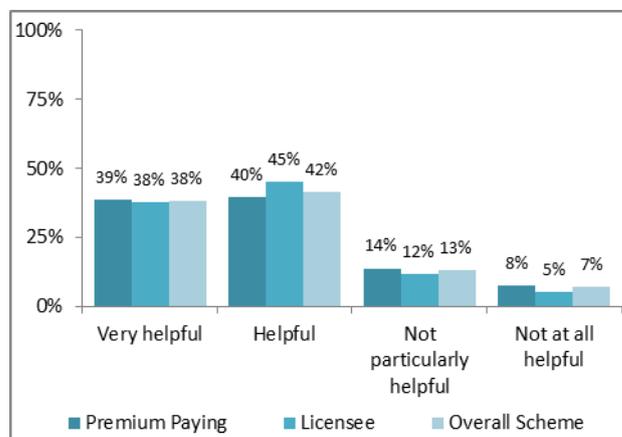


Figure 14: Helpfulness of plan to return to work.

As can be seen in Figure 14, the majority of workers across the Comcare Scheme believed that their return to work plan was either helpful (42%) or very helpful (38%). Only 7% said that their plan was not at all helpful.

Relationship with their Employer

An injured worker's perceptions of work, and the relationship they have with their employer, both play a key role in influencing their recovery and return to work outcomes.

Attitude to work

Figure 15 shows the proportion of workers within the Comcare Scheme with positive perceptions of the work they were doing at the time they were interviewed.

As can be seen in Figure 15, workers within the Comcare Scheme are positive about their work with a high proportion indicating that their work was important to them, that work satisfied them and that they enjoyed their work.

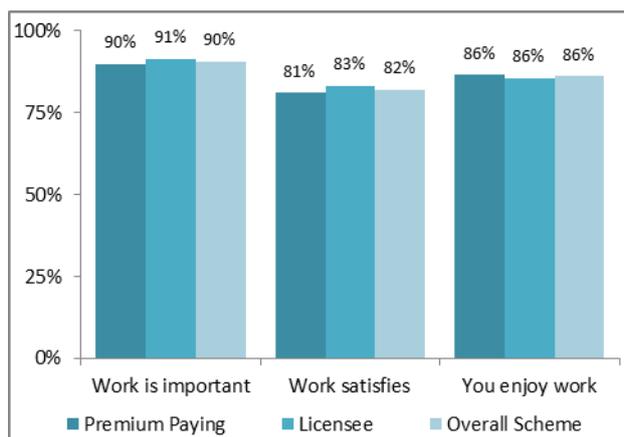


Figure 15: Attitudes to work.

Perceived contribution and workload

Figure 16 shows the proportion of workers with positive perceptions about their role and the contribution they make.

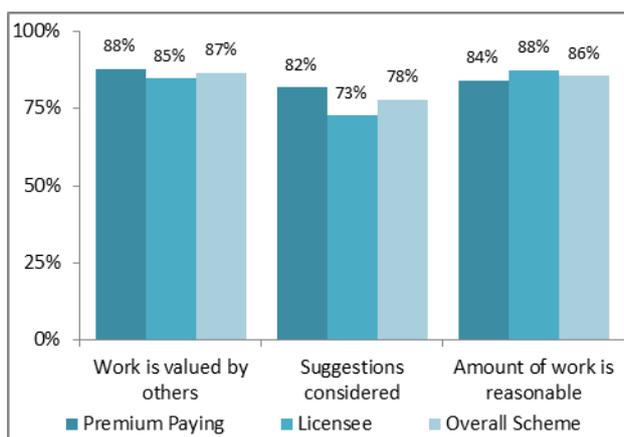


Figure 16: Perceived role and contribution.

As can be seen in Figure 16, workers within the Comcare Scheme were positive, with most believing that others valued their work, that their opinions and suggestions were considered and that the amount of work they were doing was reasonable given their recovery. Workers in the premium paying sector were significantly more positive than those in the licensee sector in relation to feeling their suggestions were considered.

The Comcare Scheme

Workers tend to deal with a number of different people and organisations as part of

their workers' compensation claim process. The Injured Workers' Survey asked participants about their perceptions of the overall scheme in relation to its integrity, the general communication within the system, as well as how the scheme treated them.

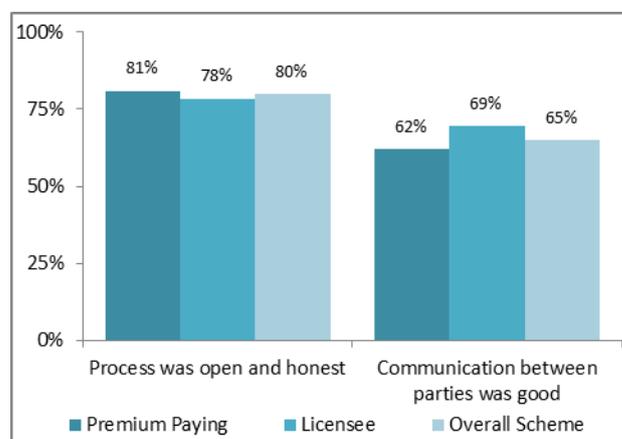


Figure 17: Scheme integrity and communication.

As can be seen in Figure 17, workers within the Comcare Scheme tended to perceive that the process was open and honest, but less likely to perceive that there was good communication between the various people and organisations they dealt with.

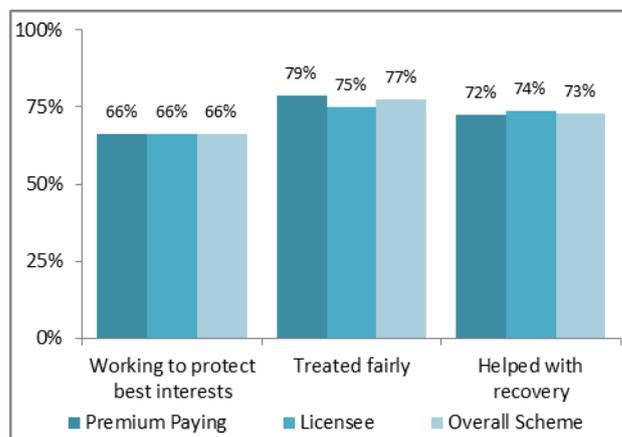


Figure 18: Perceptions of scheme.

As shown in Figure 18, workers within the Comcare Scheme also tended to be positive about the system, with most believing that they were treated fairly (77%), and that the system helped with their recovery (73%). Workers were less likely to believe that the system was working to protect their best interests (66%).

Service from Claims Management Team

There are different arrangements in place for the management of workers' compensation claims within the premium paying and licensee sectors. Premium payer claims are managed by Comcare, while claims within the Licensee Sector are managed either internally or through an insurance agency.

Quality of Service

Workers were asked about the quality of the service they received from the organisation that was managing their workers' compensation claim in the six-months prior to their interview. Service quality was captured across nine statements relating to three areas:

- General conduct (Figure 19)
- Responsiveness (Figure 20)
- Competency (Figure 21)

General Conduct

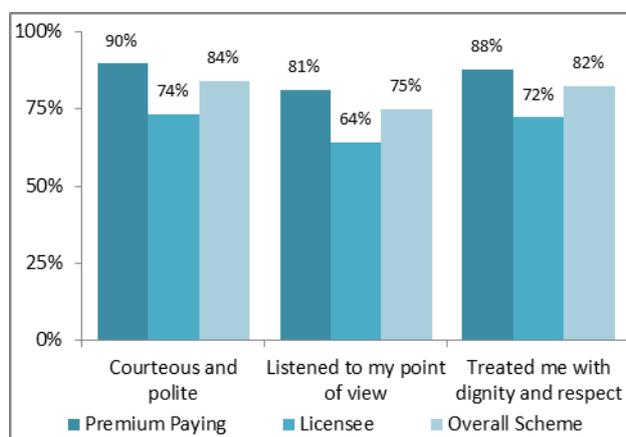


Figure 19: Perceived conduct of claims manager.

As can be seen in Figure 19, workers from the premium paying sector were significantly more likely to be positive about the general conduct of their claims managers, than those from the licensee sector. Workers within the Comcare Scheme were less likely to perceive that their point of view had been listened to, compared to the other measures of general conduct.

Responsiveness

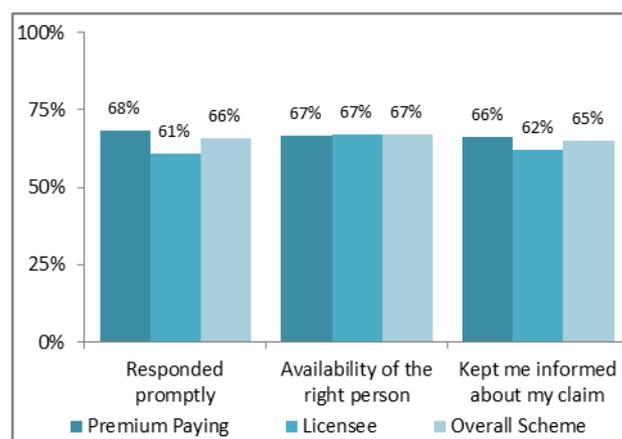


Figure 20: Perceived responsiveness of claims manager.

As shown in Figure 20, of the three service areas, workers within the Comcare Scheme were least satisfied with the responsiveness of claims management staff, with less than 70% feeling that they were responded to promptly, kept informed, or able to get hold of the right person. These results suggest there is potential for claims managers to improve in this area.

Competency

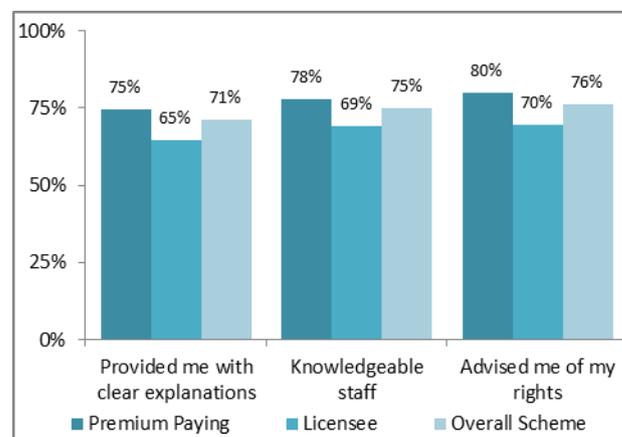


Figure 21: Perceived competency of claims manager.

As can be seen in Figure 21, workers within the Comcare Scheme were generally positive about the competency of claims management staff. Workers from the Premium Paying Sector were significantly more positive than those from the Licensee Sector.

Overall Satisfaction

Following the nine service attribute statements, workers were asked how satisfied they were with their overall dealings with the organisation managing their workers' compensation claim in the six-months prior to the interview.

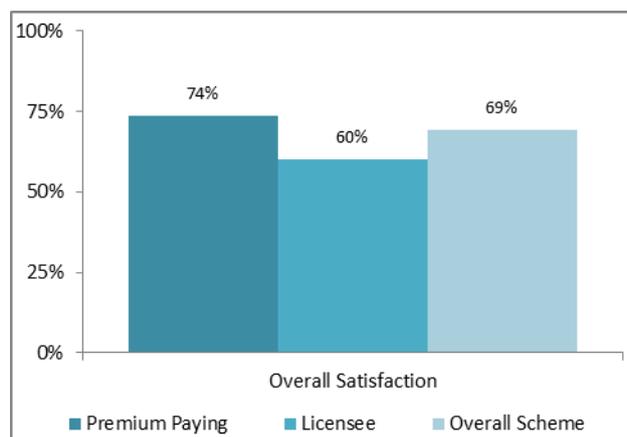


Figure 22: Overall satisfaction.

As can be seen in Figure 22, workers from the Premium Paying Sector were significantly more likely to be satisfied (74%), than to those from the Licensee Sector (60%).

Key Insights & Opportunities

This section uses findings from the Comcare Injured Worker Survey, along with administration data, to provide various insights and possible opportunities for employers to improve outcomes for both workers and the agency/organisation. The information is believed to have the potential to assist employers to better support workers in their recovery, promote an early return to work, and reduce their overall claims liability for agencies/organisations.

The three areas to be discussed in this section are:

- Workers' levels of resilience and the relationship of resilience with time off work and claim costs (Figures 24 and 25)
- Workers' perceived responsibility for their injury/illness, and the relationship of this with time off work and claim costs (Figures 26 and 27)
- Workers' perceived contribution of their employer to their injury/illness and the relationship of employer contribution with time off work and claim costs (Figures 28 and 29).

Resilience

The Comcare Injured Workers Survey uses the Brief Resilience Scale to measure resilience. Resilience refers to an individual's ability to bounce back from stressful events or changes in circumstances. This has been found to be important in the workers' compensation arena as it impacts how an injured worker recovers and returns to the workplace.

Figure 23 shows the proportion of injured workers within the Comcare Scheme with low, medium and high resilience, in comparison to the general population of Australian Public Service (APS) staff, as derived through the 2013 State of the Service (SOS) Survey.

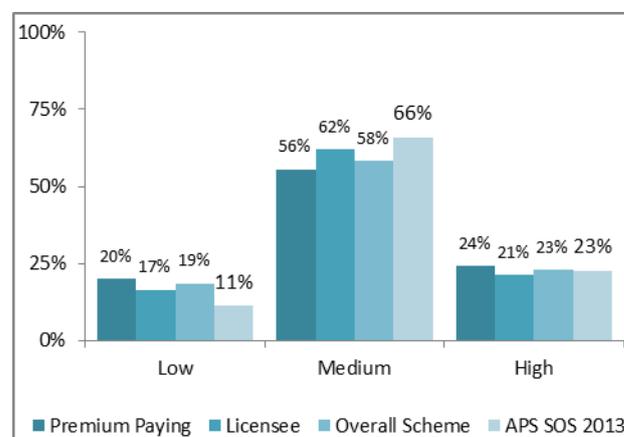


Figure 23: Resilience across the Comcare Scheme.

The resilience profile of workers within the Comcare Scheme is largely typical. As can be seen in Figure 23, a key difference between the general APS population and the injured worker population is that those with workers' compensation claims were more likely to have low levels of resilience, and less likely to have medium levels of resilience. There was very little difference in the resilience levels of injured workers from the premium paying and licensee sectors.

Research suggests that an injured worker's level of resilience plays a big role in their recovery, with different outcomes being realised for workers with high, medium and low levels of resilience. Figure 24 shows the average time off work for workers by their level of resilience.

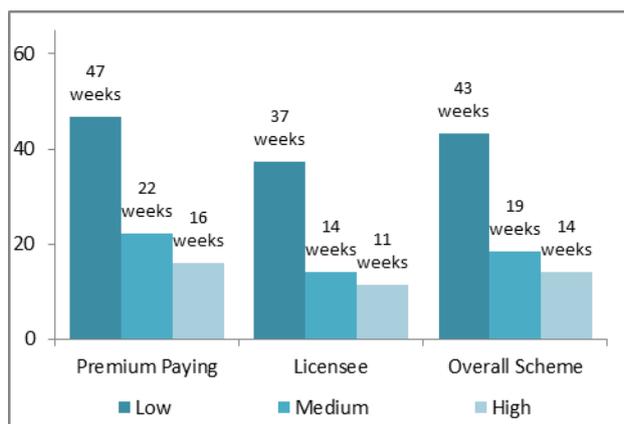


Figure 24: Time off work by resilience level.

When considering the number of weeks off work for workers by their level of resilience, Figure 24 shows that workers within the Comcare Scheme who have low levels of resilience (43 weeks) required more than twice the number of weeks off work compared to workers with either medium (19 weeks) or high levels of resilience (14 weeks). Importantly, both of these differences are statistically significant, not only at a scheme level but also within both sectors.

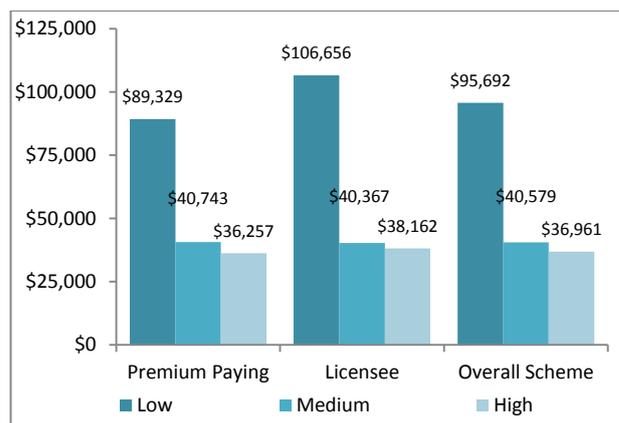


Figure 25: Cost to date by resilience level.

Consistent with Figure 24, Figure 25 shows that respondents with lower levels of resilience tend, on average, to have claims that cost more than twice that of respondents with medium or high levels of resilience. Again, these differences are statistically significant at both a scheme level and within both sectors.

These results show that by identifying an injured worker's level of resilience, it is possible to not only understand their likely incapacity duration and their potential claim costs, but to also be in a better position to know the level and type of assistance that workers might need to support them in their recovery journey.

Perceived Responsibility of Injury/Illness

In order to establish attribution of responsibility, workers were asked whether they thought they were partially, totally or not at all responsible for causing their injury/illness.

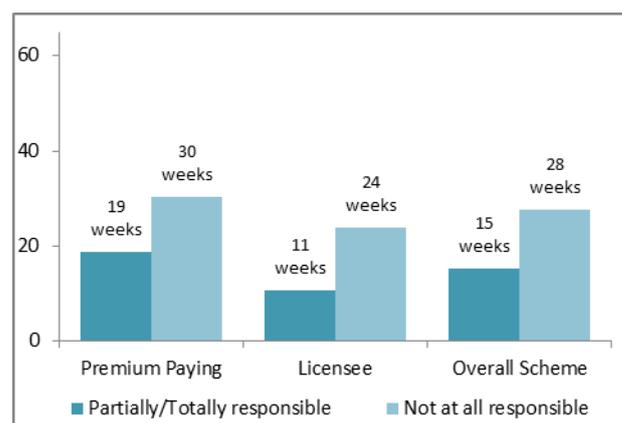


Figure 26: Time off work by perceived responsibility.

As seen in Figure 26, workers within the Comcare Scheme who believed that they were not at all responsible for their injury/illness took more time off work (28 weeks) than those who believed that they were either partially or totally responsible for their injury/illness (15 weeks). Importantly, this difference was statistically significant at both a scheme level and within both sectors.

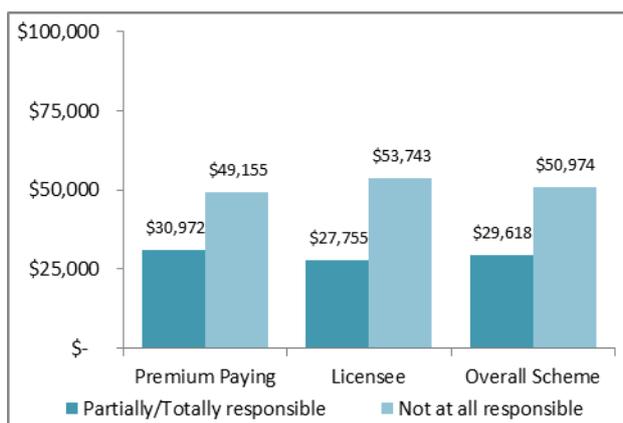


Figure 27: Cost to date by perceived responsibility.

Further, as shown in Figure 27, the cost of claims for people who felt they were not at all responsible for their injury/illness, on average, tended to be \$21,000 more than for those who felt they were either partially or totally responsible. Importantly, this difference was statistically significant at both a scheme level and within both sectors.

These results suggest that by appreciating and understanding how a worker perceives the circumstances surrounding the cause of their injury/illness, those involved in the claim and/or return to work process will have a greater insight into how and why an individual may react in certain circumstances. These insights can also be taken into consideration when planning different recovery and return to work strategies for workers.

Employer Contribution to Injury/Illness

Workers were asked if they thought their employer contributed to their injury/illness in some way. Figure 28 shows the average

number of weeks off work by workers' perceptions in relation to whether their employer had or had not contributed to their injury/illness, while Figure 30 shows the average cost of claims to date.

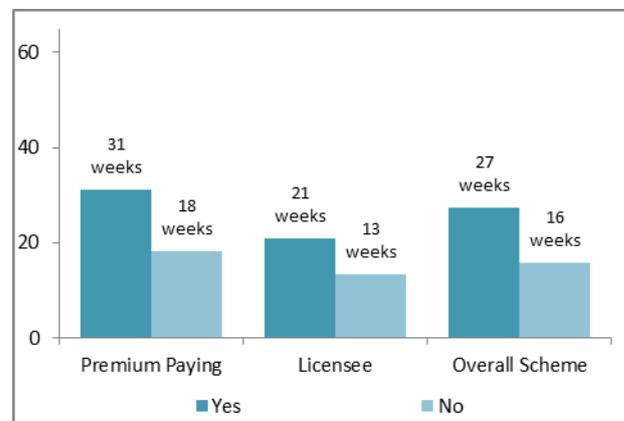


Figure 28: Employer contribution by time off work.

As can be seen in Figure 28, workers who believed that their employer contributed to their injury/illness took more time off work (27 weeks) than those who believed that their employer had not contributed (16 weeks). Importantly, this difference was statistically significant at both a scheme level and within both sectors.

The question of whether an employer contributed to a worker's injury/illness may not impact the initial determination of a claim, however, it may impact the overall liability and cost of a claim.

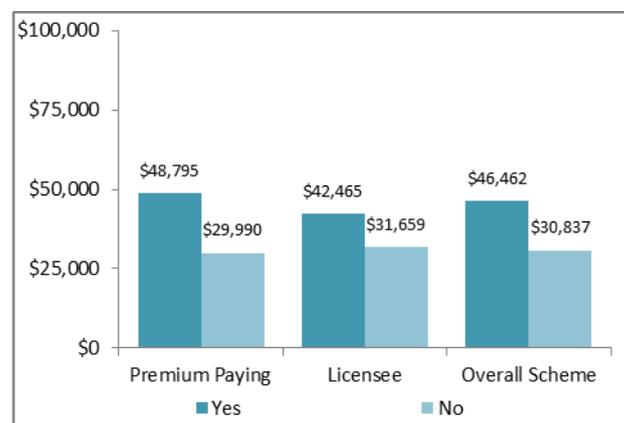


Figure 29: Employer contribution by cost to date.

As can be seen in Figure 29, workers who believed that their employer contributed to their injury/illness had a higher claim cost (\$46,462) compared to those who did not believe this was the case (\$30,837). Importantly, this difference was statistically significant at both a scheme level and within both sectors.

Overall, these results show that for workers within the Comcare Scheme, their perceptions in relation to whether or not their employer contributed to their injury/illness can have an impact on their incapacity duration and claim cost.

Summary

Feedback from injured workers suggests that employers within the Comcare Scheme have put various strategies in place to aid the recovery and return to work journey of injured/ill workers, including the availability of reduced working hours and different duties. While the health benefits of work have been established, understanding the perceptions of workers about the impact of returning to work on their recovery is important to determining how best to manage and influence the role of work in recovery.

The importance of the findings outlined in the Key Insights & Opportunities section of this report are, that despite the no-fault nature of the Comcare scheme, a worker determines their own perceptions, and as such, the reality of their own situation. While their perception may not be consistent with the underlying no-fault concept, it is their perception that can impact their recovery and claim liability.

This information gives employers and Comcare insight into how and why individuals react in the way they do, enabling them to investigate alternative management strategies to accommodate and address people's resilience

levels, their perceptions about who was responsible for their injury/illness, and importantly, their return to work journey.

By adopting appropriate management strategies in these circumstances, research has shown that there is potential for employers and Comcare to reduce both the length of time someone is away from work, as well as the cost of their claim, while at the same time, improving the outcomes for injured workers.

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