



Australian Government

Comcare

REHABILITATION MANAGEMENT SYSTEMS AUDIT TOOL

Version 1.3

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INTRODUCTION

PURPOSE

Rehabilitation management refers to the assistance provided to an injured employee with a work related injury who has an incapacity for work or impairment.

This audit tool sets out the key elements of a rehabilitation management system in the Comcare scheme. It is used by Comcare, premium paying agencies, self-insured licensees and claims management providers working in the scheme, to assess rehabilitation management systems in an organisation and to identify areas for improvement.

This tool draws on legislative compliance items set out in the *Safety, Rehabilitation and Compensation Act 1988* (SRC Act) (and other legislation) and better practice elements determined through Comcare's research and cross-jurisdictional scanning.

The tool is published, used and updated by Comcare. The Safety, Rehabilitation and Compensation Commission also use this tool in their monitoring role of self-insured licensees in the Comcare scheme.

THE REHABILITATION MANAGEMENT SYSTEM AUDIT TOOL

The tool is based on the following Australian/New Zealand standards:

- > AS/NZS 4801:2001 Occupational health and safety management systems—Specification with guidance for use
- > AS/NZS 4804:2001 Occupational health and safety management systems—General guidelines on principles, systems and supporting techniques.

The audit tool assesses rehabilitation management systems against five elements across 27 criteria:

1. Commitment and corporate governance (3 criteria)
2. Planning (4 criteria)
3. Implementation (13 criteria)
4. Measurement and evaluation (6 criteria)
5. Review and improvement (1 criterion)

RELATED DOCUMENTATION

1. *Rehabilitation management system audit workbook*
2. *Rehabilitation management audit report template*

APPLYING THE AUDIT TOOL

This audit tool contains 27 criteria grouped into five elements. An auditor will make judgements as to whether the criteria have been met. Their judgement is informed by evidence that verifies that systems exist and that they are being effectively and appropriately administered.

AUDIT SCOPE

Audit findings should be representative of the state of the rehabilitation authority's overall rehabilitation management system. The scope of any rehabilitation management system review needs to be sufficient to produce reliable and robust findings regarding the state of the rehabilitation authority's rehabilitation management systems. The Audit Plan should identify whether all criteria are being evaluated, or whether the scope is limited.

If a rehabilitation authority does not manage rehabilitation centrally then site selection will be at the discretion of the auditor. The auditor will need to be satisfied that the site selection sufficiently represents the organisation and will produce reliable outcomes.

A rehabilitation management system review may involve examining a certain number of rehabilitation files. The auditor needs to apply the population sampling technique in the following table if auditing the entire system and its implementation. The sample may be increased if multiple sites are being tested. It should be noted that the auditing timeframes are the minimum requirements. Where organisations are in the process of establishing their systems, the auditors may provide for more audit days.

Claims with rehabilitation activity in 12 months prior to audit	Suggested number of rehabilitation files to be sampled	Allocated days per person for two person team (including preparation and report writing)
1–15	All	3
16–100	16	4
>100	30	5

Where an auditor uses discretion in relation to the sampling methodology outlined above, which would usually be the case in a targeted review, the auditor must provide an explanation for the alternate sampling methodology in the audit report.

The scope of the audit should be confined to examination of the current rehabilitation management system to ensure that the audit findings are timely and relevant. The audit sample should therefore be confined to an investigation of rehabilitation cases that have had some form of activity within 12 months before the audit date.

To adequately assess how well a 'rehabilitation authority' is exercising its powers and meeting its responsibilities under the SRC Act, the auditor must choose an appropriate sample from the rehabilitation file population. The breadth of activity that should be reviewed includes rehabilitation assessment and program determinations under sections 36 and 37 of the SRC Act, the provision of suitable employment under section 40 and the implementation of early intervention activities.

COMPETENT AUDITORS

The audit should be conducted by objective and impartial auditor(s) aided by technical expert(s) as required, selected from within the organisation, or from external sources. The collective competence of the audit team should be sufficient to meet the objectives and scope of the particular audit and provide confidence as to the degree of reliability that can be placed on the results. Auditor independence may be demonstrated by an auditor being free from responsibility for the activity being audited.

Guidance on assessing the competence of an auditor can be obtained from the *International Standard ISO 19011—Guidelines for auditing management systems*, Chapter 7—Competence and evaluation of auditors.

DOCUMENTATION REVIEW

The 'rehabilitation authority' will need to collate documentation to assist the auditor with evaluating their performance against the relevant audit criteria.

Examples of the types of evidence that may be reviewed include:

- > policies and procedures
- > minutes or outcomes of meetings
- > training records
- > internal audit reports
- > internal performance reports
- > staff bulletins.

The *Rehabilitation management system audit workbook* will assist in identifying and preparing relevant documentation for the auditor.

The privacy and confidentiality of all information collected for the purposes of the audit is protected under the *Privacy Act 1988* (Privacy Act).

FILE REVIEW

After considering the documentation provided, the auditor may review the selected rehabilitation files.

INTERVIEWS

The rehabilitation authority may need to arrange a time for the auditor to meet with and interview a selection of employees.

Groups of employees who may be interviewed include:

- > senior management
- > workplace managers
- > rehabilitation case managers
- > rehabilitation providers
- > injured employees.

The *Rehabilitation management system audit workbook* identifies questions that the auditor may ask the groups of employees during the audit process to assess the extent to which policies and procedures are being followed in practice.

Any information collected through interviews is protected under the Privacy Act and respondent confidentiality will be respected. Individual responses will not be made available to the rehabilitation authority.

LATE SUBMISSION OF EVIDENCE

As a general rule, evidence submitted after the close of the audit and prior to the draft report being issued cannot be used to change a rating for a criterion. However, it will be considered, and if satisfactory, the auditor may note in the commentary that the matter was closed-out after the audit.

AUDIT CRITERIA

ELEMENT 1: COMMITMENT AND CORPORATE GOVERNANCE

The rehabilitation authority will document its commitment to rehabilitation. This documentation will benchmark the organisation's objectives, be used to formulate strategic direction and be reviewed to ensure it remains relevant. The documentation will also demonstrate that the organisation strives for continuous improvement. It will be endorsed and supported at the executive level and be relevant to the organisation's overall values, vision and business objectives.

Sound corporate governance is the process by which organisations are directed, controlled and held to account. The rehabilitation authority's executive provides stewardship for its rehabilitation management system and commits adequate resources to ensure continuous improvement.

The term encompasses authority, accountability, stewardship, leadership, direction and control exercised in the organisation. It includes the transparency of corporate structures and operations, the implementation of effective risk management and internal control systems and the accountability of management to stakeholders.

Documented commitment

A statement by the employer of its commitment, intentions and principles in relation to its overall rehabilitation management system performance including its commitment to minimising the human and financial cost of injury and providing for fair compensation when an injury occurs. It provides a framework for action and setting rehabilitation management system objectives and targets. It could take the form of a policy, management arrangements or an employer/worker agreement.

- 1.1 The rehabilitation authority sets the direction for its rehabilitation management system through a documented commitment by senior executive.

Corporate governance

- 1.2 The rehabilitation management system provides for internal and external accountability.
- 1.3 The rehabilitation authority identifies, assesses and controls risks to the rehabilitation management system.

ELEMENT 2: PLANNING

The successful implementation and operation of a rehabilitation management system requires an effective planning process with well-defined and measurable outcomes. Planning is essential for both the initial implementation of an overall management system and for specific elements that make up that system and should be done in consultation with relevant stakeholders.

Administrative arrangements

- 2.1 The rehabilitation authority has a delegation schedule, signed by the principal officer, as per section 41A of the SRC Act

Rehabilitation planning

- 2.2 The rehabilitation authority recognises legislative obligations and plans for legislative and regulatory compliance, having regard to any policy advice that Comcare or the Commission may issue.
- 2.3 The rehabilitation authority sets objectives and targets and identifies key performance measures for its rehabilitation management system.

- 2.4 The rehabilitation authority establishes plans to:
- (i) achieve its objectives and targets
 - (ii) promote continuous improvement
 - (iii) provide for effective rehabilitation arrangements.

ELEMENT 3: IMPLEMENTATION

A rehabilitation authority achieves its rehabilitation management system objectives, identified in its rehabilitation management system plans, by involving its people as well as focusing and aligning its systems, strategies, resources and structure.

Resources

- 3.1 The rehabilitation authority allocates adequate resources to support its rehabilitation management system.

Communication and awareness

- 3.2 The rehabilitation authority defines and communicates responsibilities to relevant stakeholders.
- 3.3 The rehabilitation authority communicates relevant information regarding the rehabilitation process to its employees including their rights and obligations.

Training

- 3.4 The rehabilitation authority identifies training requirements, develops and implements training plans and ensures personnel are competent.

Compliance with the legislation

The rehabilitation management system must ensure effective rehabilitation occurs and legislative obligations are met in relation to the following:

Early intervention

- 3.5 The rehabilitation authority implements an early intervention program, including the early identification and notification of injury.

Rehabilitation assessments

- 3.6 The rehabilitation authority effectively uses the provisions of section 36 to conduct rehabilitation assessments in accordance with the SRC Act and the Guidelines.

Rehabilitation programs

- 3.7 The rehabilitation authority provides rehabilitation programs in accordance with the provisions of section 37 of the SRC Act, and the Guidelines, and ensures consultation occurs between all parties in regards to the rehabilitation process.

Suitable employment

- 3.8 The employer takes all reasonable steps to provide employees with suitable employment or to assist employees to find such employment.

Determinations, suspensions and reconsiderations

- 3.9 The rehabilitation authority makes determinations in accordance with the SRC Act and the Guidelines:
- (i) that are in writing and give adequate reasons
 - (ii) that are signed by the delegate
 - (iii) that are not retrospective.
- 3.10 The rehabilitation authority makes determinations in relation to employee non-compliance in accordance with the SRC Act, Guidelines and their written policy and procedures
- 3.11 The rehabilitation authority complies with the provisions of the SRC Act when managing reconsiderations or reconsiderations of own motion [criterion applicable to licensees only].

Confidentiality

- 3.12 The rehabilitation authority maintains the confidentiality of information and applies legislative requirements.

Document and file management

- 3.13 The rehabilitation authority maintains the relevant level of reporting, records and/or documentation to support its rehabilitation management system and legislative compliance.

ELEMENT 4: MEASUREMENT AND EVALUATION

A rehabilitation authority measures, monitors and evaluates its rehabilitation management system performance and takes corrective action where required. Measuring, monitoring and evaluating are key activities which ensure that the rehabilitation authority is performing in accordance with its documented commitment to rehabilitation, objectives and targets as well as initial and ongoing planning. The results should be analysed and used to determine areas of success and to identify activities requiring corrective action and improvement.

A rehabilitation authority establishes, implements and maintains documented procedures to monitor and measure, on a regular basis, the key characteristics of its rehabilitation management system operations and activities. Periodic audits of the rehabilitation management system may be necessary to determine whether the system has been properly implemented and maintained and whether the rehabilitation authority has met its performance objectives.

Monitoring

- 4.1 The rehabilitation authority monitors planned objectives and performance measures for rehabilitation management activities.
- 4.2 The rehabilitation authority monitors rehabilitation providers' performance in terms of quality of service delivery, costs, progress reports and outcomes.

Auditing and reporting

- 4.3 The rehabilitation authority conducts an audit program—performed by competent personnel and in accordance with the requirements of the Commission and Comcare—to measure performance of its rehabilitation management system.
- 4.4 Audit outcomes are appropriately documented and actioned. The rehabilitation authority reports to senior executive on its rehabilitation management system performance, including audit outcomes.

- 4.5 The rehabilitation authority communicates the outcomes and results of rehabilitation management system audits to its employees.
- 4.6 The rehabilitation authority provides the Commission or Comcare with reports or documents as requested.

ELEMENT 5: REVIEW AND IMPROVEMENT

A rehabilitation authority regularly reviews and aims to continually improve its rehabilitation management system with the objective of improving its overall rehabilitation performance.

Continuous improvement

- 5.1 The rehabilitation authority analyses rehabilitation management system performance outcomes against documented objectives to determine areas requiring improvement and promotes and implements continuous improvement strategies.