



Australian Government

Comcare

Act early to support your workers

Developing a framework for early intervention

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Introduction

This document provides guidance on developing and implementing an effective early intervention framework to promote better health and recovery outcomes for workers.

The earlier you notice a worker is experiencing potential signs of injury or ill-health, the sooner you can take steps to help them. Acting early to establish a culture of safety and support is critical to wellbeing and recovery.

The term ‘early intervention’ refers to actions taken in response to an assessment of an injured or ill worker that begin as soon as possible after an incident or interaction, and that aim to improve return to work outcomes.¹

The purpose of an early intervention framework is for you as an employer to consider and set out a structured program of supports and services that you offer to enable and support workers as soon as emerging symptoms of injury or illness occur.

An early intervention framework should:

- be a comprehensive workplace framework that is integrated into your organisation’s overall health and wellbeing management system
- involve commitment from senior leaders to prioritise initiatives
- include workers in its development and implementation
- be tailored to your unique organisational environment.

Early intervention must never limit, delay or replace a worker’s access to workers’ compensation. A worker’s right to claim workers’ compensation is not affected by any early intervention support they receive.

¹ Monash Centre for Occupational and Environmental Health and the Healthy Working Lives Research Group, *Early Intervention in the Workers’ Compensation Process*, 2024, <[Early intervention in the workers’ compensation process | Safe Work Australia](#)>

Defining the purpose and objectives

Consider the purpose and objectives of an early intervention framework for your organisation. For the best outcomes, early intervention supports and services should apply to all workers, regardless of whether an injury or illness is work-related.²

The provision of support services, self-management advice or medical or allied health treatment for an injury or illness (regardless of the cause) can assist a worker to recover at work or return to work, drive workplace productivity and contribute to a positive safety culture.

An early intervention framework should include:

- **a purpose statement** outlining your organisation's commitment to a culture of health and safety
- **clear objectives** setting out the main goals of early intervention.

Providing this information helps workers understand the intent and value of the early intervention framework and can build engagement from all participants.

Example purpose statement and objectives

<ORGANISATION NAME> is committed to providing a productive and supportive work environment. We demonstrate this commitment by providing early and appropriate treatment and support to workers with emerging symptoms of injury or illness. Our early intervention action is designed to minimise the impact and duration of emerging symptoms of ill health, injury or illness.

The goals of early intervention are to:

- support workers' health and wellbeing
- facilitate quick access to treatment and services
- support workers to remain at work or to minimise time away from work
- reduce costs for workers and the organisation
- achieve a positive and supportive workplace culture
- enhance organisational wellbeing and productivity.

² <[Early intervention in the workers' compensation process](#) | Safe Work Australia>

Identifying and minimising risk

Prevention and early intervention overlap. Workplaces that actively promote worker health, safety and wellbeing:

- reduce the risk of workplace injury and illness
- mitigate complications associated with chronic illness
- have better outcomes in terms of costs associated with healthcare, productivity and performance.³

An organisation should have oversight of the health and wellbeing of its workforce. Under the *Work Health and Safety Act 2011* (WHS Act), organisations also have duties to understand risks and recognise physical and psychosocial hazards to prevent or minimise harm and injury in the workplace.

Physical hazards are factors or conditions within the environment that can harm worker health. People working within an industry or doing the same type of work are exposed to specific physical hazards in the workplace.

Psychosocial hazards are aspects of work that have the potential to cause psychological or physical harm. Preventing psychological harm is an essential part of creating a healthy and safe workplace.

When physical or psychological harm has occurred, early intervention has benefits for an employer and their workers. The longer someone is off work, the less likely they are to return to work.⁴ This has health, financial and social impacts for workers, their families and their support networks. There is also an impact on business costs, with lack of support and absences contributing to lost productivity, staff retraining and reduced worker morale.

For more guidance on identifying and managing risk and improving worker health and wellbeing, see [Safe and healthy work | Comcare](#).

³ Fabius R, Thayer RD, Konicki DL, Yarborough CM, Peterson KW, Isaac F, Loeppke RR, Eisenberg BS, Dreger M. *The link between workforce health and safety and the health of the bottom line: tracking market performance of companies that nurture a “culture of health”*. Journal of Occupational and Environmental Medicine. 2013 Sept. 55(9). 993–1000.

⁴ Australasian Faculty of Occupational and Environmental Medicine, *Australian and New Zealand Consensus Statement on the Health Benefits of Work, Position Statement: Realising the Health Benefits of Work*, Royal Australasian College of Physicians, Sydney, 2011, <<https://www.racp.edu.au/docs/default-source/advocacy-library/realising-the-health-benefits-of-work.pdf>>

Reporting an injury or illness

Effective early intervention relies on a workplace culture that encourages workers to talk about any injuries or illnesses early (whether the condition is work-related or not) and supports them to recover and manage their injury or illness.

An early intervention framework could include:

- **reporting processes** – clear and simple guidance on who a worker can talk to about an injury. Ensuring timely and appropriate response to injury or illness, regardless of its severity.
- **roles and responsibilities** – responsible people and teams within the organisation and their roles in the reporting and response process. For example, managers, health and safety representatives, human resources, injury or rehabilitation teams.
- **supporting information** – reference to relevant processes and procedures to support the reporting process within your organisation, as well as other legislative obligations in relation to injury, illness or disability, for example, the WHS Act, the *Safety, Rehabilitation and Compensation Act 1988* (SRC Act) and the *Disability Discrimination Act 1992* (DDA).

Early intervention information should be easily accessible to all workers. Regular and ongoing promotion ensures workers keep the framework front of mind.

Considerations when developing a reporting process for your organisation could include:

For workers

- Who does a worker talk to about an injury or illness in the first instance? *Their manager, a dedicated injury management team and/or human resources representative?*
- How does a worker seek support or services? *Is there an online form to complete, an email contact or a phone number to call? Do new forms need to be created?*
- When should they expect a response or action to be taken? *How will you ensure workers access support as early as possible?*
- Who should they escalate any issues to? *Their manager, a dedicated injury management team or human resources representative?*
- Where do they find information or resources? *Intranet, induction materials, presentations, team meetings, e-learning, case studies, FAQs.*

For managers and supervisors

- How to identify early [warning signs](#) of injury or illness. *Managers are often the first to be notified of or notice signs of an injury or illness.*
- How to be genuine in their enquiries to worker wellbeing. *Manager response sets the tone for the worker.*
- How to have open conversations. *If a manager or supervisor responds positively, you are likely to achieve a much better outcome for worker recovery, health, wellbeing and workplace engagement.*

- What is the process for seeking support and advice when a manager becomes aware of an injury or illness? *Contacting a dedicated injury management team or human resources representative via form, email or phone? Do they understand their WHS responsibilities?*
- What information, support, resources or training are available to support managers and supervisors? *On early intervention processes and procedures, WHS responsibilities and workers' compensation requirements. See: [eLearn: Early intervention - An overview for managers and supervisors](#).*

Early contact and care

Early contact and response to injury or illness contributes to improved health outcomes for workers and increases organisational efforts in promoting a healthy and productive workplace.⁵

Actions that are proven to be effective in the early stages include:

Early supportive contact – when aware of an injury or illness, ensure contact is made with a worker promptly and considerately. This helps to set expectations around what initial contact and communication looks like for your organisation. Initial contact should be made by an appropriately trained, educated and experienced person, such as a case manager, workplace rehabilitation provider or allied health provider.

Identifying worker capabilities and risks – evidence-based initial assessments (for example, questionnaires, surveys or mental health checklists) that involve the evaluation of potential physical or psychological risks can help identify barriers to recovery and return to work.

Matching supports and services to risks – initial assessments are beneficial if supports and services are matched to the risks identified. Tailoring supports to the worker's needs, and clear communication about processes to access the supports, can establish trust between the worker, their employer (and insurer, where relevant). This helps to optimise recovery and work outcomes.

Different organisations approach early contact and care differently. It is important to tailor your response to injury or illness to suit your workers, their injury or illness, and your work environment. See [Early systematic psychosocial matched care for workers' compensation schemes](#) for information on how organisations, such as Australia Post, use psychosocial matched care to deliver targeted interventions to improve return to work outcomes.

Case study: ACT Government early intervention programs

The ACT Government is a modern, progressive employer with more than 30,000 workers and volunteers. It holds a self-insurance license for workers compensation, which gives it the flexibility to offer contemporary, worker-centred support to its diverse workforce.

The ACT government provides early interventions for all ACT public sector workers through a range of targeted support services, and has developed evidence-based programs that respond to its unique workforce issues. The proactive early intervention programs are underpinned by strategy and policies on prevention and management of WHS risks, and informed by timely reporting of WHS hazards and incidents. Early intervention programs are managed by the Work Safety Group (WSG) and are complemented by other more targeted supports available in individual business areas within directorates and agencies.

Facilitated Discussion

When interpersonal conflicts in the workplace escalate into formal disputes, this can harm workers' mental health and lead to long-term absences. To help prevent this, the ACT Government offers

⁵ Wyatt, M, Lane T. *Return to Work: A Comparison of Psychological and Physical Injury Claims*. Safe Work Australia, < <https://www.safeworkaustralia.gov.au/system/files/documents/1711/return-to-work-a-comparison-of-psychological-and-physical-injury-claims.pdf>>

Facilitated Discussion, a proactive conflict resolution service for early intervention. Delivered by Converge International as part of the Employee Assistance Program, Facilitated Discussion provides voluntary, brief and informal intervention to help resolve workplace relationship issues before they escalate.

While the confidential nature of the program means limited outcome data is available, most of the participants have remained in their roles, and none have gone on to lodge a workers compensation claim.

Early Intervention Physiotherapy

For workers who have experienced a musculoskeletal injury at work, Early Intervention Physiotherapy provides physiotherapy sessions to help them recover at work, or return to work faster. The program also gives workers strategies to manage their symptoms and supports workers to discuss any work modification needs with their manager.

Most workers attend 6 sessions, which are delivered by contracted external physiotherapy clinics. The clinics report back to employers on any clinical red flags, recommended work adjustments, and any psychosocial risks identified via a validated screening tool.

Complex Reasonable Adjustment Assessment

The Complex Reasonable Adjustment Assessment program supports workers with psychosocial, neurological or physical needs, as well as neurodivergent workers (and their managers). It identifies and implements reasonable adjustments to maintain worker work capacity and to help people to stay healthy and participate fully at work.

The program is delivered by contracted work rehabilitation providers who are health professionals with specialist skills and knowledge to support workers in the workplace.

The provider undertakes a point-in-time assessment to identify any reasonable adjustments. They also develop a plan to build worker and manager capacity to implement the adjustments and navigate any ongoing issues. After the assessment, the worker and their manager and HR team receive a brief report with the recommended adjustments and other actions.

This process generally involves one or 2 phone calls to gather information, followed by 2–3 face-to-face discussions at the workplace, virtually or another premises. With the consent of the worker, their treating practitioner may also be included in the process.

Most workers who participate in the assessment remain in their roles and maintain their work capacity.

For more information about ACT Government early intervention programs contact WSG@act.gov.au.

Supports and services

Work can play an important role in worker recovery. Any supports or services that can feasibly help a worker remain in the workplace will ultimately benefit the worker as much as the organisation. Rehabilitation is a set of interventions designed to optimise functioning and reduce disability in individuals with health conditions in interaction with their environment.⁶

Interventions (supports and services) should be based on a worker's individual circumstances and start as soon as possible, regardless of whether a worker's condition is work-related and whether they intend to submit a workers' compensation claim.

A worker can receive early intervention support before, during or after a workers' compensation claim. If a claim is accepted, the SRC Act sets out additional legislative duties and responsibilities of workers, employers and Comcare. These duties and responsibilities can work alongside early intervention supports and services.

There is evidence that coordinated, multi-domain interventions that involve healthcare and the workplace (and workers' compensation stakeholders, when relevant) improve recovery and return to work outcomes. These interventions should be adapted and applied by an employer to suit their organisational environment.

Privacy and the right not to participate

When developing an early intervention framework, it is important to respect worker privacy and their right not to participate. Employers must ensure that personal information is collected, stored and used in line with relevant privacy legislation, and that workers understand how their information will be handled. Any interventions should be voluntary, with clear communication that choosing not to engage will not disadvantage the worker or affect their employment. Providing options for anonymous or confidential access to services can help maintain trust and encourage participation, while reinforcing that support is available without pressure or obligation.

Examples of early intervention supports and services

Reasonable adjustments and workplace modifications

Reasonable adjustments are any form of assistance or adjustment that is necessary, possible and reasonable to reduce or eliminate barriers for a worker to participate in work. The DDA requires employers to make reasonable adjustments so a person with a disability can perform the inherent requirements of their job, unless this would cause 'unjustifiable hardship'. Reasonable adjustments should be tailored to meet individual requirements and circumstances; they can be temporary or long-term. Many adjustments can be low-cost and can result in productivity and retention benefits.

Actions to support workers in the workplace can be as simple as adjusting a workstation setup, changing the workspace or providing aids, such as ergonomic equipment or tools. Adjustments can

⁶ World Health Organization, *Rehabilitation*, 2024, < <https://www.who.int/news-room/fact-sheets/detail/rehabilitation> >

also include changes to work arrangements, such as adjustments to work hours or duties (for example, part-time work, changes to start or finish times, working remotely, assistance in managing workload, modifying duties or work methods).

Graduated return to work

A graduated return to work can enhance work participation for physical and mental health conditions, particularly when part of a rehabilitation program or plan.⁷ A graduated return to work plan should include:

- defined goals and objectives
- a well-structured and documented program setting out duties and hours of work and how these will progress over time
- exercise and rest breaks when relevant
- the actions each person (such as the worker and manager) are responsible for.

Employee Assistance Program

Most organisations have an Employee Assistance Program (EAP) that provides confidential counselling or psychological support to workers. In addition to physical and mental health supports, some EAPs can also offer resources to help workers navigate financial and legal issues. EAPs can also support managers to have conversations about early intervention with their workers.

Triage service

A triage service provides injured or ill workers with fast access to the most appropriate health advice to treat or self-manage their condition. A triage service can be delivered by an appropriately qualified health professional, such as a nurse. A triage service assists a worker by recommending treatment pathways and facilitating timely appointments (for example, with a general practitioner, allied health provider, financial, family or counselling services). They can also offer additional advice to support recovery, such as ergonomic assessment or a graduated return to work plan. See: [Evaluation of Comcare Early Intervention Service Pilot](#).

Medical and allied health treatment

Establishing relationships with medical or allied health providers (such as general practitioners, physiotherapists or psychologists) can ensure quick access to professional care. It is important to consider which services or treatments will be available to workers through their workplace, how many sessions will be paid for and how these sessions will be funded.

Health coaching

Health coaching is a client-centred, collaborative intervention designed to support individuals in sustainable lifestyle change. It involves working in partnership with individuals to guide, empower and motivate them to change their behaviour. Health coaching encourages goal setting, active learning and self-management. It can be delivered face-to-face (individually or in groups) or remotely by phone, email, online platforms or mobile apps. It can be provided as part of routine consultations, or as a standalone activity.

⁷ Monash Centre for Occupational and Environmental Health and the Healthy Working Lives Research Group, *Early Intervention in the Workers' Compensation Process*, 2024, <[Early intervention in the workers' compensation process | Safe Work Australia](#)>

Cognitive behavioural therapy

Cognitive behaviour therapy (CBT) is an effective treatment approach for a range of mental and emotional health issues, including anxiety and depression. CBT aims to help identify and challenge unhelpful thoughts and to learn practical self-help strategies. These strategies are designed to bring about immediate positive changes in the quality of life. CBT can be most effective when it is work-focused and used as part of a rehabilitation program tailored to a worker's individual needs. See: [Before Blue](#) for more information on an early intervention mental health program.

Financial assistance

Employers should ensure workers are informed about the types of financial assistance available to support participation in early intervention. This may include the cost of workplace adjustments, medical or allied health treatment, rehabilitation services or other support programs designed to assist work capacity. In some cases, financial assistance may also extend to payments for lost wages or access to leave arrangements for time off work. An employer should communicate the options transparently and provide accessible processes for workers to access the support available.

Resourcing

Early intervention is more likely to succeed if there are dedicated funds and resources for supports and services.

People

You should assign the right people to implement, manage and monitor early intervention. This could include:

Supervisors and managers offer direct support, can identify early signs of injury or illness and monitor recovery at a team level. Supervisors have an important role to play in adjusting workloads and duties, ensuring safe working conditions, and maintaining regular contact with workers.

Early intervention coordinators monitor workplace incidents, receive internal referrals (from workers and managers/supervisors) and make initial contact with workers to determine what support they need prior to a referral to a rehabilitation provider and/or coordinator

Rehabilitation providers and/or coordinators liaise with healthcare providers, workers, supervisors/managers, develop rehabilitation plans, monitor worker progress and adjust plans if needed. Evidence suggests that having a third party who provides support and communication between relevant parties is of benefit for reducing work absence, recovery at and return to work.⁸

Human resources (HR) team oversees compliance with policies, procedures and processes and to provide administrative support. HR can maintain worker records, provide advice on entitlements and support the recovery and return to work process.

Financial and administrative resources

You should ensure there is adequate budget to support early intervention supports and services, and to equip people with the training and capacity to administer early intervention processes.

A financial investment in early intervention can support timely recovery, prevent long-term injuries, and foster a healthier, more productive workforce.

⁸ Monash Centre for Occupational and Environmental Health and the Healthy Working Lives Research Group, *Early Intervention in the Workers' Compensation Process*, 2024, <[Early intervention in the workers' compensation process](#) | [Safe Work Australia](#)>

Monitoring and improvement

Capturing early intervention data helps to accurately monitor and measure worker outcomes, experiences and recovery rates from early intervention supports and services. It can be used to evaluate the effectiveness of an early intervention framework, assess an organisation's return on investment and support continuous improvement.

When collecting data, reference should be made to your purpose and objectives for early intervention to ensure the right data is collected to monitor and evaluate the program. It is important to determine what you want to measure, define it, and outline the purpose of it. Examples of data to monitor could include:

- time taken to report injuries/illnesses – how quickly injuries or illnesses are reported through formal notification processes or informally to managers/supervisor
- the time to intervention – how soon support is provided
- recovery and/or return to work rates
- worker satisfaction – feedback from workers on their experience
- cost savings for the organisation.

Targets must be specific to the organisation and should reflect what the program is aiming to achieve for workers and by when. Amend targets when required.

For more information on implementing and monitoring a program, see [eLearn: Implementing and monitoring early intervention programs in the workplace](#).

An organisation should consider how early intervention data can be combined with data from other sources (such as WHS, workers' compensation or human resources data), to improve the effectiveness of an early intervention framework or program. The use of data to identify emerging trends, hazards and issues can assist an organisation to design and implement prevention and early intervention initiatives.