



Australian Government

WHS Incidents and Insurance Readers' Guide - Participants

This guide offers advice on Work Health and Safety (WHS) incident management, and insurance arrangements for all individuals in activities under Workforce Australia Services, Workforce Australia Online, Transition to Work, Parent Pathways or other Departmental programs, a full list of covered activities is available at Attachment A.

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Introduction

This guide outlines the steps you should follow if an incident or accident occurs, and the assistance available to you afterwards as a participant, including the children of participants in Parent Pathways.

It also outlines how you can claim insurance if you are injured while doing an approved employment services activity.

In the *WHS Incidents and Insurance Readers' Guide – Participants*:

- “**participants**” refers to individuals undertaking Workforce Australia Services (including Workforce Australia Online), Transition to Work, Parent Pathways or other Employment Services Programs, a full list of covered activities is available at Attachment A;
- “**provider**” refers to any employment services provider offering an activity listed in Attachment A; and
- “**activity supervisor**” refers to your supervisor while at an employment services activity or placement.

General Advice Warning

The information in this Guide is for general information only and does not consider an individual's personal objectives, financial situation or needs. Before acting on this advice you must assess whether it is appropriate in accordance with your own objectives, financial situation or needs.

If this advice contains information about a particular financial product, you should ensure you obtain a Product Disclosure Statement (PDS) in respect of that product prior to making any decision to acquire that product.

Important: The *WHS Incident and Insurance Readers' Guide – Participants* is not a substitute for the insurance policies. It does not reflect all terms, conditions, exclusions and limitations of the actual insurance policies. Please refer to the insurance policy documents for the actual terms and conditions. If there are any discrepancies between this Guide and the insurance policy documents, the insurance policy documents take precedence.

Further information

For further information on the insurance arrangements purchased by the Department of Employment and Workplace Relations (the Department), please contact the National Customer Service Line on 1800 805 260, or your provider.

Full policy details are available in the relevant insurer's Product Disclosure Statement, or PDS. In the event of any discrepancy between these documents, the Policy Disclosure Statement takes precedence.

Incident Management

If you are injured in an incident, or experience a near-miss while participating in an approved activity please tell your activity supervisor immediately and seek appropriate medical assistance. One example of a near miss could be avoiding a box falling from a height. You should also tell your activity provider about the incident or near miss.

You must report any incident that you are involved in that may have caused injury to another person or caused property damage.

Do not admit fault or accept responsibility for any incident.

Always inform your activity supervisor and provider that an incident has occurred.

What happens if you are injured?

The following table describes what should happen if you are injured or experience a near miss while at an approved activity.

Initial Phase

Timeframe: Incident occurs, 0-2 hours

Who	Requirements/processes
Participant	Report the incident to your activity supervisor and activity provider
Activity supervisor or employer	Supports the participant: <ul style="list-style-type: none"> • Offer first aid (if needed) • Contact emergency services (if needed) • Make sure they are safe and comfortable • Contact the participant’s activity provider
Activity supervisor or employer	Completes the incident report form <ul style="list-style-type: none"> • Records all details of the incident, and • Sends the form to the activity provider

Next Steps

Timeframe: Within the same day

Who	Requirements/processes
Relevant provider	Reports the incident to the Department
Department	Reviews the incident report and any additional information submitted: <ul style="list-style-type: none"> • Follows up with the provider to address any concerns raised by the incident and ensures the provider is giving support to the participant • Reports incidents to the Department’s broker and insurer • Supports the provider with insurance processes

Ongoing Support
Timeframe: Day 2+

Who	Requirements/processes
Participant	<ul style="list-style-type: none"> • Seeks medical treatment (if required) to assist in recovery • Retains receipts and seeks reimbursement of costs from Medicare • Submits an insurance claim if you are out of pocket in relation to the injury. • Submits any medical certificate to Services Australia (if applicable) to determine if eligible for a temporary medical incapacity exemption <p>Note: the relevant provider can help you with completing the claim form, or with other insurance questions</p>
Relevant provider	<p>Supports the participant by:</p> <ul style="list-style-type: none"> • Reviewing the incident form and have the participant sign it (if possible) • Supporting the participant to seek treatment from an appropriately qualified professional • Providing the participant with a copy of this guide and explain how and what they can claim from insurance • Assisting the participant to complete insurance papers (as necessary)
Insurer	<p>Considers the participant’s claim and relevant information by:</p> <ul style="list-style-type: none"> • Assesses claim and evidence supplied by the participant • Advises the participant of the outcome including claim processes and insurance coverage and limits (as necessary) • Reimburses eligible medical expenses in accordance with the policy and evidence supplied by the participant/provider

Insurance for Participants

Who is covered?

The insurance arrangements cover individuals in approved activities. Refer to Attachment A for a list of programs and activities covered.

What should you expect from your provider(s)?

Your provider is responsible for the following:

- Giving you a copy of this guide or telling you where you can find a copy online, and answering any questions you may have.
- Supporting and assisting you in your recovery if you are injured on an approved activity.
- Providing you with appropriate insurance claims forms, and assistance to submit an insurance claim if required.
- Adhering to insurance arrangements and incident management procedures the Department has in place outlined in any applicable deeds or guidelines.
- Reporting to the Department any incidents and/or near misses that occur within the timeframes listed above and providing updates to the Department on incidents as required.
- Adjusting a participant's Mutual Obligation requirements (if needed)
- Supporting the participant to seek an exemption from Mutual Obligations through Services Australia if needed.
- Reporting 'notifiable incidents'¹ that occur in their workplace to their jurisdiction's Work Health and Safety Regulator.
- Educating themselves on work health and safety legislation applicable in their jurisdiction.

¹ <https://www.safeworkaustralia.gov.au/doc/incident-notification-fact-sheet>

Group Personal Accident Insurance

How do I make a claim on the insurance policy?

1. Report the incident/accident immediately to both your supervisor at the location where the incident/accident occurred, and your activity provider.
Note: Your activity supervisor and provider will notify the Department that an incident has occurred.
2. Seek medical attention, if required, from your doctor or your local medical clinic. Keep all receipts that are related to payments you have made because of the injury, for example, if you took a taxi to your GP/doctor for treatment.
3. Request a copy of the insurer's claim form from your provider or seek assistance from your provider to complete the insurer's claim form. Keep records of any receipts you have collected for reimbursement through an insurance claim.
4. Your provider can help you submit the claim form if you would like assistance, details on how to submit the form directly to the insurer are available on the claim form.
5. If required, the insurer will contact you/your provider directly regarding the progress of your claim.

When does the insurance coverage start and end?

This insurance covers you while you are attending an approved activity, including travel to and from activities and between activities.

What is covered by the policy?

This insurance policy provides cover to participants for an injury or death that occurs while participating in approved activities including direct travel to and from, or during such activities.

Travel includes:

- from the participant's home to the approved activity and vice versa
- between approved activities
- during the approved activity
- between the provider's location to the approved activity and vice versa.

"Injury" means personal injury resulting from accident and which is not an illness as outlined under the policy.

Reimbursement for costs certified necessary, by a legally qualified medical practitioner, and incurred within twenty-four (24) months of the participant sustaining injury, for medical expenses and treatment following an accident, that do not attract a Medicare rebate. Examples of these *may* include the following, depending on the state or territory in which you live:

- ambulance service, operating theatre fees in a private hospital, bed/room charges in a private hospital, chiropractor, physiotherapist, osteopath, naturopath, masseur, nurse or similar provider of medical services.

What is NOT covered by the policy?

- **This policy will not pay doctors' bills, hospital bills, or other medical accounts that are recoverable under Medicare.**
- **This policy will not pay for any balance of monies due or payable after deduction of any Medicare benefit, commonly referred to as the "Medicare Gap".**
- **The Personal Accident Policy is not a workers' compensation policy. Participants in the approved activities covered by this policy do not qualify for workers' compensation.**

If you do incur 'gap' expenses, reimbursement of these expenses by your provider may be permissible.

What if the claim is rejected by the insurer?

If the insurer rejects the claim, you may seek a review. There is a three tier review process, all steps in the review process are free of charge.

First, you may speak to a staff member from the insurance company about the claim. Secondly, if the matter is not resolved to your satisfaction, you may access the insurance company's Complaints and Dispute Resolution Process.

If the matter remains unresolved, you can lodge a complaint with the Australian Financial Complaints Authority ([Home | Australian Financial Complaints Authority \(AFCA\)](#)).

Can participants claim WorkCover?

No, participants on income support undertake placements that are recognised as 'Approved Programs of Work' under Social Security legislation. This means that a participant is not an employee while undertaking a placement.

As participants are not employees, they are not eligible for workers' compensation.

Does the insurance cover illness?

No, illness, sickness or pre-existing injuries are not covered under these policies.

Public and Products Liability Insurance

How to make a Public and Products Liability Claim

1. Report the incident/accident immediately to your supervisor at the location where the incident/accident occurred and to your provider.
2. Do not admit fault, accept responsibility or enter into any discussions or correspondence with any third parties.
3. Read, complete and sign the Public and Products Liability claim form including supplying any relevant supporting documentation. Your provider can assist you with this step.
4. Forward the Public and Products Liability claim form to the insurer. Your provider can assist you with this step.
5. If required, the insurer will contact you directly regarding the claim.

What is covered?

This policy covers participants' liability arising out of their negligence that causes personal injury to third parties or damage to third parties' property while participating in approved activities.

Additional information

If you have any questions on the information contained in this guide, please speak to your provider. Alternatively, contact the National Customer Service Line (NCSL) hotline on 1800 880 082.

Attachment A

Participants in Workforce Australia, Workforce Australia Online, Transition to Work and Parent Pathways undertaking the following Activities are covered under the insurance policies referred to in this guide:

Activities
Career Transition Assistance
Employability Skills Training
Launch into Work
Local Jobs Program
Non-government programmes (AAR)
Parent Pathways (and children)
Self-Employment Assistance Workshops & Training
Transition to Work
Observational Work Experience
Provider Sourced Voluntary Work
Work for the Dole
Work for the Dole (CSP)
Workforce Specialists